

Wisconsin WIC Program



Vendor Manual

This constitutes the Vendor Guidebook as referenced in Wis. Admin. Code § HFS 149, (Wisconsin Administrative Code.) The Vendor Guidebook should be kept at each authorized WIC store at all times for reference.

Your local WIC project is:

State Vendor Management Office
Phone (608)266-6912

Department of Health & Family Services
Division of Public Health
PPH 4537 (Rev. 7/09)

State of Wisconsin

WISCONSIN WIC PROGRAM

Special Supplemental Nutrition Program for Women, Infants and Children (WIC)

WIC is the Special Supplemental Nutrition Program for Women, Infants and Children. It began in 1972 and is funded by the U.S. Department of Agriculture (USDA). The Wisconsin Department of Health and Family Services, Division of Public Health administers the Program in Wisconsin.

The purpose of WIC is to:

- Improve birth outcomes, which reduces infant illness and deaths during the first year of life
- Improve the health and nutrition of women, infants, and children
- Help families achieve healthy, life-long eating habits

WIC provides:

- nutrition and breastfeeding information
- supplemental nutritious foods
- referrals to other health and nutrition services

Stores authorized to accept WIC checks are critical to the success of the program by making specific nutritional foods available to WIC participants.

Effective: November 1, 2007

In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability.

To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call (800) 795-3272 or (202) 720-6382 (TTY). USDA is an equal opportunity provider and employer.

TABLE OF CONTENTS

	<u>Page</u>
INTRODUCTION	
WIC is ...	5
Definitions	6
MANAGERS' SECTION	
Authorized Vendor's Rights and Responsibilities	10
Nondiscrimination	10
Compliance with Federal, State and Local Requirements	10
Accepting WIC Checks	10
Stock	11
Prices	12
Required Information	13
Use of Vendor Stamp	13
Change of Business Name, Corporate Officers/Members, Managers, and Location	13
Change of Ownership, Permanent or Temporary Closings	14
Services to Participants	14
Training	15
Acts of Employees	14
Report Problems with WIC Participants	15
Recordkeeping	15
Duration of Authorization	15
Returned WIC Foods	15
Successfully Accepting WIC Checks	16
Stop Payment	17
Reviewing and Correcting Checks Prior to Deposit	17
Re-Depositing Rejected WIC Checks	17
Check Rejection Reasons and Solutions	18
Summary of Reasons for Check Rejection and Vendor's Liability	25
Site Visits by WIC Program Representatives	26
Monitoring by Local or State Agency Staff	27
Failure to Comply with Program Requirements	28
Appeal Process	28
Manager and Cashier Training Outline	29
CASHIERS' SECTION	
A Message For Cashiers	31
<i>Cashier Instructions for Accepting Wisconsin WIC Checks</i>	33
Wisconsin WIC ID (Identification)	34

Cashier Quizzes	
Questions from the <i>Cashier Training DVD/Video</i>	35
Test Your Knowledge of WIC Approved Foods and the Process to Accept WIC Check	36

Quiz Answers	
Questions from the <i>Cashier Training DVD/Video</i>	44
Test Your Knowledge of WIC Approved Foods and the Process to Accept WIC Check	45

APPENDIX

Vendor Agreement	51
<i>Vendor Order Form</i>	60
<i>Vendor/Participant Complaint Form</i>	61
<i>Retail Vendor Application Amendment Form</i>	62

INTRODUCTION

WIC is . . . the "Special Supplemental Nutrition Program for Women, Infants and Children." WIC is a nutrition and health program designed to help meet the nutritional needs of each WIC participant. Qualified health professionals in the WIC Program provide screening for medical and nutritional problems, nutrition education and counseling and referrals to other needed health and nutrition services.

The WIC Program differs from other USDA programs such as the FoodShare Program because:

- it is specifically designed to provide supplemental nutritious foods to pregnant or breastfeeding women, new mothers, infants and children up to age five to assist in the prevention and correction of medical and nutritional problems;
- the foods provided are tailored to meet the individual needs of each participant;
- only those stores able to meet specific WIC Program requirements are authorized to accept WIC checks; and
- eligibility for participation in the WIC Program is determined by a documented nutritional risk, a proven level of income, and state residency.

Nearly 120,000 Wisconsin WIC participants purchase approved foods each month at authorized WIC stores by spending the WIC checks issued to them at WIC clinics all around the state.

The United States Department of Agriculture (USDA) funds WIC. The Department of Health and Family Services, Division of Public Health administers WIC in Wisconsin. Local WIC projects throughout Wisconsin provide support for participants and authorized vendors.

The Agreement between the State of Wisconsin and the vendor, as well as the obligations agreed to within it, is binding and contractual. Its referenced materials include 7 C.F.R. § 246, (Code of Federal Regulations), Wis. Admin. Code § HFS 149, (Wisconsin Administrative Code), the *Vendor Manual*, the completed vendor application, the completed Stock Price Surveys, and other applicable statutes, regulation and amendments and updates. Vendors are encouraged to contact the local WIC project or the State WIC Office for clarification of any of these items or program policies and procedures.

The policies and procedures necessary to conduct the WIC Program at the local and state level are further described in the *WIC Operations Manual* and the State Agency Plan of Operations and Administration.

The State WIC Office informs authorized vendors of changes in program policies and procedures through notices and periodic updates. Vendors are responsible to ensure that cashiers and other employees are advised of the changes. Vendors are responsible for the acts of their employees related to the WIC Program.

DEFINITIONS

Above-50-percent vendor - An authorized vendor that derives more than 50 percent of annual food sales revenue from WIC checks. It includes a vendor applicant applying for an initial authorization that estimates they will derive more than 50 percent of annual food sales revenue from WIC checks.

Agreement - The document signed by a vendor and the state WIC office that contains the terms and conditions under which the vendor is authorized to accept and redeem WIC checks in exchange for approved foods and the completed application form, the vendor's stock price surveys, the *Vendor Manual*, *WIC Approved Foods* list, memos or other formal instructions, and terms of participation issued by the state WIC office to vendors.

Applicant - A grocery store or pharmacy located in Wisconsin that applies to the State WIC Office to be an authorized vendor.

Approved foods - The types, brands or varieties of foods that are selected and approved by the state WIC office.

Authorized infant formula provider list - The list of wholesalers, distributors, retailers and manufacturers approved by the State WIC Office to provide infant formula to authorized vendors.

Authorized vendor - A vendor that has been authorized by the Department to accept checks from participants and have the checks redeemed by the Department.

Change of ownership - Any transfer of the right to control the assets or management of an authorized vendor, or any majority changes in ownership of a vendor.

Civil money penalty - A monetary penalty imposed on an authorized vendor in lieu of disqualification.

Contract period - The period of time that a vendor is an authorized vendor. In this case, a period of three calendar years beginning November 1, 2007 and ending on October 31, 2010 regardless of the date authorization was granted.

Customer area - The portion of a grocery store or pharmacy that is normally frequented by customers and does not include storage or other areas that are normally not frequented by customers.

Date of Use - The date that the WIC check is accepted by the vendor in exchange for WIC approved foods.

Department - The Wisconsin Department of Health and Family Services.

Disqualification - The official act of ending WIC participation of either an authorized vendor or of a participant because of a program violation.

Enforcement assessment – The surcharge added to a forfeiture or recoupment.

First Date To Use - The date indicated on the upper right hand corner of the WIC check to indicate the first day the check may be used to purchase WIC foods.

FNS - Food and Nutrition Service of the U.S. Department of Agriculture, the agency that administers the WIC Program and Food Stamp Program.

Food sales - The sales of all foods that are eligible items under the food stamp program

Food Stamp Program - The assistance program under 7 USC 2011 to 2029, and known in Wisconsin as the FoodShare Program.

Forfeiture - The sum of money required to be paid to the state WIC office as a result of a vendor violation.

Grocery store - A retail store that sells a general line of food for the household to eat, such as breads and cereals; fruits and vegetables; meats, fish, and poultry; and dairy products or approved by the food stamp program as a specialty store.

Last Date to Use - The date indicated on the upper right hand corner of the check, just below the First Date to Use to indicate the last date a check may be used to purchase WIC foods.

Liquid nutritional/medical products – Products that are specially formulated to provide nutritional support for a diagnosed medical condition when conventional foods are not adequate.

Local project - An agency that has a contract with the Department to provide WIC services such as eligibility determination, WIC check distribution and nutrition counseling for participants.

Maximum food price - The maximum amount an authorized vendor or vendor applicant within each vendor peer group may charge for an approved food item or for a standardized combination of foods.

Minimum stock requirement - The types, varieties, brands and quantities of foods vendor applicants and authorized vendors are required to keep in the customer area as specified in the WIC *Vendor Manual* and Stock Price Survey.

Program participant - A person who is eligible for services and who receives WIC services and includes a pregnant, breastfeeding, or postpartum woman, an infant, or child who has been certified by the local project as eligible to receive WIC approved foods, nutrition education, and referrals to other health and nutrition services.

Pharmacy – An establishment issued a license to operate as a pharmacy under Wis. Stat. § 450.06, (Wisconsin Statutes), and includes the pharmacy and the persons conducting transactions on behalf of the pharmacy, including the owner, manager, a representative, an employee or any other individual who directly or indirectly participates in the operation of the pharmacy.

Project service area - The geographic area or population group served by a local project.

Proxy - A person who has been designated in writing by a participant or by the Department to obtain and to obtain and exchange WIC checks for approved foods on behalf of the participant.

Recoupment – The sum of excess payments made to the vendor as a result of violations that is repaid to the Program.

Sanction - A penalty imposed by the local project or state WIC office because of a violation of this chapter and includes disqualification, recoupment, enforcement assessments, or civil money penalties.

Special infant formula - A non-contract formula approved by the State WIC Office for infants who have a special nutritional need.

Standardized combination of foods - A group of approved foods selected by the State WIC Office.

State WIC Office – Administers the Wisconsin WIC Program, within the Department of Health and Family Services, Division of Public Health.

Stock Price Survey - The form that lists an authorized vendor's or vendor applicant's non-sale prices of approved foods that is submitted to the state WIC office.

USDA - The United States Department of Agriculture.

Vendor - A grocery store or pharmacy that sells approved foods and may include a sole proprietorship, a partnership, a cooperative association, a corporation, or another business entity operating one or more grocery stores or pharmacies.

Vendor Manual - The publication of the state WIC office that describes the WIC program and program policies related to the provision of WIC approved foods to participants, including program policies, periodic updates and amendments, applicable rules, and other requirements.

Vendor peer group - Authorized vendors and vendor applicants who have similar characteristics as determined by the State WIC Office.

Vendor stamp - A rubber stamp provided to an authorized vendor or food distribution center by the state WIC office for validating checks with the vendor's authorized vendor number.

WIC Operations Manual - A publication developed by the State WIC Office and is approved by USDA. It is for the use of local projects and details the policies and procedures necessary to operate a local WIC Program.

WIC Program or WIC - The Special Supplemental Nutrition Program for Women, Infants and Children established pursuant to 42 USC s.1786, and 7 C.F.R. § 246, and Wis. Stat. § 253.06.

WIC check - The negotiable instrument distributed by local WIC projects on behalf of the Department for use by a participant to purchase approved foods.

Wisconsin WIC ID (Identification) - The document issued by a local project to the participant or parent/guardian that includes the signature of the participant or proxies authorized to spend the participant's WIC checks.

Wisconsin WIC Program - The total of all local WIC projects and the State WIC Office's administrative units responsible for the operation and management of all WIC Program activities.

MANAGERS' SECTION

AUTHORIZED VENDOR'S RIGHTS AND RESPONSIBILITIES

As authorized WIC vendors, stores have specific rights and responsibilities. These are detailed below and in the Wisconsin WIC Vendor Agreement between the State of Wisconsin and each authorized vendor; and Wis. Admin. Code § HFS 149, the Administrative Rules that govern WIC vendors. A sample Agreement is included in the Appendix of this Manual. The rights and responsibilities of authorized vendors are:

1. **Nondiscrimination**

In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call (800) 795-3272 (voice) or (202) 720-6382 (TTY). USDA is an equal opportunity provider and employer.

2. **Compliance with Federal, State and Local Requirements**

Vendors shall comply with:

- a. WIC Program requirements specified in the Agreement, the *Vendor Manual*, Wis. Stat. § 253.06, Wis. Admin. Code § HFS 149, and 7 C.F.R. § 246, and
- b. Applicable federal, state, and local health protection laws and ordinances.

3. **Accepting WIC Checks:**

Vendors shall do all of the following:

- a. In exchange for WIC checks, provide food to participants only as specified on the authorized food list in no more than the quantities specified on the WIC checks.
- b. Allow the purchase of the full amount of food specified on the WIC check.
- c. Not provide cash, alcohol, alcoholic beverages or tobacco products or any other item that is specifically prohibited based on redeeming a WIC check or to a participant for a purchase with a WIC check.

Vendors may offer discounts, coupons and other special offers to WIC participants, if these same items are offered to all customers. Vendors are prohibited from targeting special offers and discounts to only WIC participants.

- d. Deposit checks directly in the vendor's own bank account within 45 days of the First Date to Use as indicated on the check. Checks may not be sold or used in repayment of debts to other parties.
- e. Not provide "rain checks" or provide credit for any WIC approved food item.
- f. Not charge sales tax on WIC foods. This is prohibited by the Federal Regulations.

- g. Provide foods free of charge to WIC participants.
- h. Pharmacies may only accept WIC checks for approved infant formulas and liquid nutritional/medical foods.

4. Stock

Vendors shall:

- a. Provide food that is fresh and within its expiration date. Expired WIC foods must be removed from the customer area of the store. The sale of infant formula after its expiration date is also prohibited by the Federal Food, Drug, and Cosmetic Act and Wis. Admin. Code Section ATCP 75 Appx.
- b. Grocery stores must meet minimum stock requirements at all times on the shelves or coolers in the customer area of the store. Minimum stock requirements are:

WHOLE GRAINS	6 packages; 9 - 16 oz each; any combination of: 100% whole wheat bread, buns or rolls, OR Soft corn tortillas, OR Whole wheat tortillas, OR Brown rice	
FRUIT AND VEGETABLES	\$28 total retail value (\$10 of the total retail value must be from fresh fruit and vegetables). <ul style="list-style-type: none"> • 5 types fresh, frozen or canned fruits; two types must be fresh (not including lemons and limes); AND • 5 types fresh, frozen or canned vegetables; two types must be fresh (not including onions, garlic, and ginger). 	
	<u>Fruit Example:</u> fresh apples fresh bananas frozen strawberries canned peaches canned pineapple	<u>Vegetable Example:</u> fresh tomatoes fresh carrots frozen peas tomato sauce canned green beans
CEREAL	6 different types (hot or cold); 9 oz boxes or larger; minimum 4 boxes of each; 2 types must be whole grain (marked "WG" on WIC Approved Foods List).	
JUICE	9 containers 64 oz.; 3 different flavors; 12 containers 46 - 48 oz.; 3 different flavors; 4 containers 11.5 – 12 oz. frozen concentrate; one flavor.	
MILK	3 gallons unflavored whole (Vitamin D or homogenized); 8 gallons unflavored 1% or skim (low fat or fat free); 3 half-gallons unflavored 1% or skim (low fat or fat free).	
EGGS	4 one-dozen cartons; white only; any size; any grade	

PEANUT BUTTER	4 containers; 16 -18 oz.; any brand, creamy, crunchy, extra-crunchy or natural, low sodium/salt, reduced/no sugar.
CANNED BEANS	16 cans; 14 - 16 oz; three different types
DRIED PEAS, BEANS LENTILS	4 pounds total; two 1 lb. bags of 2 different types.
INFANT FORMULA	Good Start® Gentle Plus only: 20 cans 12 oz. powder; OR 62 cans 13 oz. liquid concentrate OR 10 cans 12 oz. powder AND 31 cans 13 oz. liquid concentrate
INFANT CEREAL	Gerber brand only; six 8 oz. boxes; 2 different types.
INFANT FRUIT & VEGETABLES	Gerber 2 nd Foods brand only; 2-pack (3.5 oz each); 6 2-packs of 3 different plain fruits AND 6 2-packs of 3 different plain vegetables.

Note: There is no longer a minimum stock requirement for cheese.

Refer to the Approved Foods List and the Stock Price Survey for more information.

*Stores with infant formula theft problems may keep infant formula in a secure area. A notice of the location and prices must be posted in the area where the participant would expect to find the formula. Minimum stock must be maintained.

- c. Pharmacies must stock a sufficient quantity of infant formula to meet the needs of WIC customers. Pharmacies are required to order special infant formulas and liquid nutritional/medical foods upon request.

5. Prices

Vendors shall do all of the following:

- a. Charge participants prices that are equal to or lower than prices charged to other customers.
- b. Provide price lists to the State WIC Office or the local WIC project upon request of the State WIC Office or local WIC project.
- c. Maintain reasonable prices consistent with prices indicated on the stock price survey, and charged by other vendors in the same vendor peer group.
- d. Display the prices of approved foods either on the foods, on the shelves in proximity to the foods, or in the immediate area where the foods are kept in the customer area of the store. Prices should be clearly printed.

6. Required Information

Vendors shall do all of the following:

- a. Keep on file at the store this copy of the *Vendor Manual*, the application form, Vendor Agreement and other updated instructions from the State WIC Office and the local WIC project. These materials must be available for store personnel to use.
- b. Display a sign, sticker or other evidence of authorization as a WIC vendor in an area visible to participants.
- c. Ensure that the current *WIC Approved Foods* list is available to the cashier at each cash register or check-out lane. Food lists may be copied and laminated. Additional copies are available through the State WIC Office.
- d. Make WIC checks available in the store accessible to WIC staff performing a site visit.

7. Use of Vendor Stamp

Vendors shall do all of the following:

- a. Use the vendor stamp only for transactions completed by the vendor to whom it was issued.
- b. Not duplicate or use a duplicate vendor stamp.
- c. Return the rubber portion of the vendor stamp to the local WIC project or to the State WIC Office immediately following a change in ownership, upon closing the store or upon termination of WIC authorization.
- d. Keep the stamp in a safe place. Report a lost or stolen stamp *immediately* (within 2 days) to the State WIC Office.

If the vendor number becomes unreadable when checks are stamped, try to clean the stamp before reporting the problem to State WIC Office. If, after cleaning the stamp, the vendor number is still unreadable, contact the State WIC Office for a replacement stamp.

8. Changes in Business Name, Corporate Officers/Members, Managers and Location

Vendors shall:

- a. Immediately report any change in the business name, corporate officers/members or managers on the *Retail Vendor Application Amendment* (in the Appendix or at <http://dhfs.wisconsin.gov/forms/DPH/dph00108.pdf>).
- b. Report a change in location at least fifteen days prior to the move on the *Retail Vendor Application Amendment* (available in the Appendix or at <http://dhfs.wisconsin.gov/forms/DPH/dph00108.pdf>). The State WIC Office will review the information and determine if a new application is needed. The new application may be waived if the new location is within a 5 mile radius of the vendor's previously authorized location. The vendor must simultaneously close the previous location and open the new location.

9. Change of Ownership and Permanent or Temporary Closings

Vendors shall:

- a. Immediately report a change of ownership, permanent or temporary store closings to the local WIC project or to the State WIC Office. All WIC business must cease at that location on the legal date of the change or closing.
- b. Deposit in the vendor's bank all WIC checks accepted prior to the change of ownership or closing. WIC checks may not be accepted after the date of the legal change of ownership or closing. Return the rubber portion of the stamp to the State WIC Office.

10. Services to Participants

Vendors shall do all of the following:

- a. Offer participants the same courtesies offered to other customers and in accordance with equal opportunity guidelines under Title 7 CFR Part 15.
- b. Avoid violating civil rights laws by doing the following:
 1. Recognize cultural differences and your responsibility for treating people with respect. Be aware of language limitations or differences in their interactions.
 2. Prevent misunderstandings or legal challenges by avoiding touching, making sexual comments or inappropriate jokes when dealing with employees or customers.
 3. Make sure the store is accessible to people with disabilities, whether they are applicants for employment, employees or customers.
- c. Not provide cash or other considerations for returned WIC foods. (See page 15.)
- d. Not contact participants for any reason, for example, to obtain missing signatures or payment for rejected checks.

11. Training:

Vendors shall

- a. Attend training sessions, or send a designee from each store location, as required by the State WIC Office or the local WIC project.
- b. Ensure that all employees that process WIC checks are trained in the procedures and WIC Program requirements for accepting WIC checks.

12. Acts of Employees

Vendors are responsible for the acts of their employees related to the WIC Program.

13. Report Problems with WIC Participants

Vendors shall notify the local WIC project of instances when participants or proxies have failed to comply with WIC Program requirements or are abusive to store personnel. For example, if a participant aggressively attempts to purchase foods that are not approved with WIC checks, the incident should be reported to the local WIC project. Whenever possible, obtain the name and a participant identification number from the checks. Complete the *Vendor/Participant Complaint* form (DPH4322) found in the Appendix Section and at <http://dhfs.wisconsin.gov/forms/DPH/dph04322.pdf>. Attach any supporting documents and forward to your local WIC project. The participant or proxy involved will receive additional training and may be disqualified from WIC if found to be abusing the Program.

Local WIC projects train participants about approved foods and appropriate check-out procedures. If a WIC check is refused based on the check-out procedures described at the end of this section and in the Cashier's Section of this *Vendor Manual*, tell the participant (or proxy) to contact the local WIC project for clarification. If the participant objects, obtain the participant's name from the WIC check and report the incident to the local WIC project.

14. **Recordkeeping**

- a. Maintain for a period of three years and provide access to paper or electronic records used for state or federal tax reporting purposes and other Program records including: inventory records showing all purchases, wholesale and retail, in the form of invoices that identify the quantity and prices of specific WIC foods, books of account, shelf price records and other pertinent records
- b. Maintain documentation of the sales of FoodShare eligible items and provide upon request.

DURATION OF AUTHORIZATION

Stores are authorized as WIC vendors for a period of up to three years. Vendor authorizations will expire on October 31, 2010. Vendors are required to re-apply for each 3-year contract period. Expiration of a contract because the vendor fails to file an application is not subject to appeal. Authorization of a vendor shall terminate automatically upon a change of ownership.

The State WIC Office may deny a re-application for authorization for failure to comply with program requirements and may terminate or disqualify a vendor pursuant to 7 C.F.R. § 246, Wis. Stat. § 253.06, Wis. Admin. Code § HFS 149, the Agreement and this *Vendor Manual* at any time during a contract period.

The State WIC Office may reassess any authorized vendor at any time during the contract period using vendor selection criteria and must terminate the agreements with those vendors that fail to meet them.

RETURNED WIC FOODS

A vendor may not, under any circumstances, provide cash or other consideration to a WIC participant for the return of WIC foods. If you have reason to believe WIC food is being returned or has been returned for cash, contact the local WIC project. An effective method for avoiding this problem is to have cashiers write "WIC" on the receipt and require all customers to provide a receipt upon the return of any items. Vendors may replace a defective or expired WIC food with the same product in the same dollar amount and quantity.

SUCCESSFULLY ACCEPTING WIC CHECKS

The process for accepting WIC checks is described in the Cashiers Section of this *Vendor Manual*. If these steps are not carefully followed, checks could be rejected by WIC's bank. Training cashiers in the correct procedures for accepting WIC checks will greatly decrease the potential for rejected checks and the associated costs. Some rejected checks become the store's liability. In addition, the store's bank may charge a return fee. These are costly mistakes for an authorized vendor that can be reduced or eliminated with proper cashier training.

WIC participants or their proxies may *never* be contacted to correct errors on WIC checks, to obtain a signature, or for payment of checks rejected by WIC's bank.

STOP PAYMENT

A stop payment may be initiated on a WIC check but is not likely to occur. If the vendor followed the correct procedures for accepting WIC checks, the State WIC Office will reimburse the vendor. If correct procedures were not followed, the vendor will be liable. Contact the State WIC Office at (608) 266-6912.

REVIEWING AND CORRECTING CHECKS PRIOR TO DEPOSIT

Prior to depositing WIC checks, review them to ensure they have been completed properly. Post-it notes or other papers should not be attached to a WIC check when it is deposited. Review the following:

- Verify that the check was accepted within the First Date to Use and the Last Date to Use.
- Required Information has been properly entered on the WIC check in ink:
 - ✓ Date of Use
 - ✓ Cashier's initials
 - ✓ Dollar amount is correct for the items stated on the check
 - ✓ Vendor stamp is readable. Hand write the stamp number next to the stamp if there isn't room to get a clear stamp in the box.
 - ✓ Signed by the WIC participant or proxy
- Information on check has not been altered and no correction fluid has been used.

RE-DEPOSITING REJECTED WIC CHECKS

Checks returned by WIC's bank that are not marked "Void" may be re-deposited one time. Returned checks must be re-deposited within 75 days from the First Date to Use. Checks re-deposited more than once will be rejected by WIC's bank and will be the vendor's liability. Because checks may be re-deposited once, the vendor should instruct the vendor's bank to return checks to the vendor for review when they are rejected by WIC's bank rather than automatically resubmitting them to WIC's bank for payment.

Checks will be rejected by WIC's bank and will be returned to the vendor if the appropriate procedures described under "How to Accept a WIC Check" in the Cashiers Section of this Manual are not followed. Pages 17 through 23 are examples of bank check reject reasons, reminders and solutions. A summary is on Page 24.

When a vendor believes an error has occurred causing the check to reject or there extenuating circumstances, the vendor may submit evidence and justification for consideration. The State WIC Office may make payments to vendors to correct rejection errors or when justified by the circumstances.

Rejection Reason	DEPOSITED MORE THAN 45 DAYS AFTER THE FIRST DATE TO USE
Solution	<i>None. Automatic Rejection. Vendor is liable.</i>

PARTICIPANT NAME: Jane Doe		FAMILY ID / PARTICIPANT ID: 956672/1394858		CHECK # 06485463	FIRST DATE TO USE Oct 5, 2007
WISCONSIN WIC PROGRAM 53-530 Public Health - Madison and Dane County WIC		Misuse of checks is subject to state or federal prosecution. Void if altered.		75-1248 919 Payable through FSMC, Lake Lillian, MN Acct # 802732	DATE OF USE Nov 30, 2007
Valid For These Items Only - No Substitutions 2 * Gallon Low Fat (1%) or Fat Free (Skim) Milk 2 * 11.5 or 12 oz frozen or 46 oz cans or bottles Juice Deposited Late Void - Do Not Redeposit WN 16				Actual \$ Amounts \$ Correction Only Cashier's Initials AB \$ 11.20	Pay to the Order of WIC Vendor No. 1287 Not Payable Without Authorized Stamp
1028				Participant: Do Not Sign Until Time of Purchase	
Deposit Within 45 Days From the First Date to Use				Cashier: <i>Jane Doe</i> Do Not Accept If Already Signed - Must Match Signature ID	

⑈06485463⑈ ⑆091912482⑆ 802732⑈

Reminders:

Verify the First and Last Date to Use.

Never accept a WIC check before the First Date to Use or after the Last Date to Use. The Last Date to Use is 30 calendar days from the First Date to Use.

Deposit checks so they clear WIC's bank within 45 days of the First Date to Use to avoid rejection for a late deposit.

Rejection Reason	DOLLAR AMOUNT UNREASONABLE FOR FOOD ITEMS LISTED ON FRONT OF CHECK
Solution	<i>Before depositing, draw a single dark line through the incorrect dollar amount and record correct dollar in \$ correction box.</i>

PARTICIPANT NAME: Bob Doe		FAMILY ID / PARTICIPANT ID: 956672/1394860		CHECK # 06485471	FIRST DATE TO USE Sep 5, 2007
WISCONSIN WIC PROGRAM 53-530 Public Health - Madison and Dane County WIC		Misuse of checks is subject to state or federal prosecution. Void if altered.		75-1248 919 Payable through FSMC, Lake Lillian, MN Acct # 802732	DATE OF USE Sep 5, 2007
Valid For These Items Only - No Substitutions * 16 ounces or less Infant Cereal				Actual \$ Amounts	Pay to the Order of WIC Vendor No.
\$ DOLLAR AMOUNT CHARGED TOO HIGH W-40 1009				\$ Correction Only	Cashier's Initials AB
				\$900 Not Payable Without Authorized Stamp	
Deposit Within 45 Days From the First Date to Use				Participant: Do Not Sign Until Time of Purchase	
				Jane Doe Cashier: Do Not Accept If Already Signed - Must Match Signature ID	

⑈06485471⑈ ⑆091912482⑆ 802732⑈

Reminders:

Do not use correction fluid, attempt to scratch out or totally block out the incorrect amount or the check will be rejected as an altered check and the vendor is liable.

When an error has been made, the vendor may lower the dollar amount and redeposit. Draw a single dark line through the incorrect dollar amount, enter the correct amount above it, and redeposit. The re-deposited check must clear WIC's bank within 75 calendar days of First Date to Use.

Example of a properly corrected WIC check.

PARTICIPANT NAME: Bob Doe		FAMILY ID / PARTICIPANT ID: 956672/1394860		CHECK # 06485471	FIRST DATE TO USE Sep 5, 2007
WISCONSIN WIC PROGRAM 53-530 Public Health - Madison and Dane County WIC		Misuse of checks is subject to state or federal prosecution. Void if altered.		75-1248 919 Payable through FSMC, Lake Lillian, MN Acct # 802732	DATE OF USE Sep 5, 2007
Valid For These Items Only - No Substitutions * 16 ounces or less Infant Cereal				Actual \$ Amounts	Pay to the Order of WIC Vendor No.
\$ DOLLAR AMOUNT CHARGED TOO HIGH W-40 1009				\$ Correction Only	Cashier's Initials AB
				\$900 1287 Not Payable Without Authorized Stamp	
Deposit Within 45 Days From the First Date to Use				Participant: Do Not Sign Until Time of Purchase	
				Jane Doe Cashier: Do Not Accept If Already Signed - Must Match Signature ID	

⑈06485471⑈ ⑆091912482⑆ 802732⑈

Page Left Blank Intentionally

Rejection Reason	PARTICIPANT SIGNATURE OR AUTHORIZED PROXY SIGNATURE NOT OBTAINED ON CHECK AT TIME OF SALE
Solution	(BEFORE OR AFTER DEPOSITING) <i>None. Vendor is liable.</i>

PARTICIPANT NAME: Bob Doe		FAMILY ID / PARTICIPANT ID: 956672/1394860		CHECK # 06485469	FIRST DATE TO USE Sep 5, 2007
WISCONSIN WIC PROGRAM 53-530 Public Health - Madison and Dane County WIC		Misuse of checks is subject to state or federal prosecution. Void if altered.		75-1248 919 Payable through FSMC, Lake Lillian, MN Acct # 802732	DATE OF USE Sep 5, 2007
Valid For These Items Only - No Substitutions 15 * 13 oz Conc. Liq Good Start Supreme DHA & ARA				LAST DATE TO USE Oct 4, 2007	
<div style="text-align: center;"> <p>MISSING SIGNATURE</p> <p>VOID</p> <p>DO NOT REDEPOSIT</p> <p>W-22</p> <p>1132</p> </div>				Actual \$ Amounts	
				Pay to the Order of WIC Vendor No.	
				\$ Correction Only	Cashier's Initials AB
				\$65.56	
Deposit Within 45 Days From the First Date to Use				Not Payable Without Authorized Stamp	
				Participant: Do Not Sign Until Time of Purchase	
				Cashier: Do Not Accept If Already Signed - Must Match Signature ID	

⑈06485469⑈ ⑆091912482⑆ 802732⑈

Reminders:

The participant or proxy signature *must* be obtained at the time the foods are purchased and compared with the authorized signatures on the WIC ID. If a signature is not obtained, the vendor should not deposit the check; WIC's bank will reject it.

Participants or proxies may not be contacted at any time to obtain the missing signature. In addition, the participant should not be asked to sign the check at the next store visit. Contact the local WIC project with the participant's name, so additional training can be provided to the participant. Cashiers and other store personnel should be trained to *always* obtain participant signatures at the time of sale to avoid the loss for the vendor.

Rejection Reason	NO VENDOR STAMP, MISSING OR UNREADABLE VENDOR STAMP
Solution	Stamp check with valid WIC vendor stamp. For unreadable stamp, re-stamp the check in the vendor stamp box. The vendor number may be hand written by the stamp is it is unclear and there is not space to apply another stamp. Use permanent black ink.

PARTICIPANT NAME: Sue Doe		FAMILY ID / PARTICIPANT ID: 956672/1394859		CHECK # 06485466	FIRST DATE TO USE Sep 5, 2007
WISCONSIN WIC PROGRAM 53-530 Public Health - Madison and Dane County WIC		Misuse of checks is subject to state or federal prosecution. Void if altered.		75-1248 919 Payable through FSMC, Lake Lillian, MN Acct # 802732	DATE OF USE Sept 9, 2007
Valid For These Items Only - No Substitutions 1 * Gallon Milk 1 * 12 oz frozen calcium-added Juice				Actual \$ Amounts	Pay to the Order of WIC Vendor No.
				\$ Correction Only	Cashier's Initials AB
				\$ 5.50	Not Payable Without Authorized Stamp
				Participant: Do Not Sign Until Time of Purchase	
				Jane Doe	
				Cashier: Do Not Accept If Already Signed - Must Match Signature ID	

⑈06485466⑈ ⑆091912482⑆ 802732⑈

Reminders:

Vendors have one opportunity to stamp the WIC check and redeposit. Redeposit so the check clears WIC's bank within 75 days of the First Date to Use. The vendor is liable if the check is re-deposited too late to clear WIC's bank.

Instruct the bank that a WIC check returned to them by WIC's bank must be returned to the vendor when the check is first rejected rather than automatically resubmitting the check to WIC's bank for payment.

If the numbers aren't easy to read, try the following suggestions:

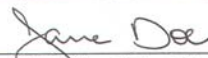
- Use only black ink to stamp the checks.
- Replace or re-ink your stamp pad. Make sure the number stamped is dark.
- Clean the stamp if the number isn't clear and easy to read. Use a toothbrush or toothpick to remove fibers in the spaces. Do not use cleaning solvents.

If the stamp is broken or worn, call the State WIC Office immediately for a replacement stamp.

Note: WIC's bank attempts to identify a vendor's number through the endorsement. If the vendor number can be determined, the bank processes the check. If the vendor number can not be determined, the check will be rejected. Vendors who have

repeated problems will be removed from this edit service and checks will be returned unprocessed.

Rejection Reason	INVALID OR UNAUTHORIZED VENDOR STAMP
Solution	<i>None. Vendor is liable.</i>


PARTICIPANT NAME: Bob Doe		FAMILY ID / PARTICIPANT ID: 956672/1394860		CHECK # 06485472	FIRST DATE TO USE Sep 5, 2007
WISCONSIN WIC PROGRAM 53-530 Public Health - Madison and Dane County WIC		Misuse of checks is subject to state or federal prosecution. Void if altered.		75-1248 919 Payable through FSMC, Lake Lillian, MN Acct # 802732	DATE OF USE Sept 9, 2007
Valid For These Items Only - No Substitutions 5 * 12.8 oz Powder Enfamil EnfaCare LIPIL				Actual \$ Amounts	
<div style="text-align: center;"> UNAUTHORIZED VENDOR W-08 </div> <div style="text-align: right;">1029</div>				\$ Correction Only	Cashier's Initials AB
				<div style="text-align: center;"> 1287 </div>	
Deposit Within 45 Days From the First Date to Use				Pay to the Order of WIC Vendor No.	
				Not Payable Without Authorized Stamp	
				Participant: Do Not Sign Until Time of Purchase	
					
				Cashier: Do Not Accept If Already Signed - Must Match Signature ID	

⑈06485472⑈ ⑆091912482⑆ 802732⑈

Duplicating a vendor stamp or using a terminated or obsolete vendor stamp is a violation of the WIC Program and can result in disqualification from the Program. The vendor is liable for the loss.

The store is liable for any checks accepted before the store receives authorization as a WIC vendor. In addition, the store may be denied participation in the WIC Program. Stores are also liable for any checks accepted after termination or after the date of an ownership change.

Rejection Reason	ALTERED CHECK: ALTERED FOODS, DATES, OR DOLLAR AMOUNTS, CORRECTION FLUID USED.
Solution	<i>None. Vendor is liable.</i>

PARTICIPANT NAME: Jane Doe		FAMILY ID / PARTICIPANT ID: 956672/1394858		CHECK # 06485763	FIRST DATE TO USE Nov 15, 2007					
WISCONSIN WIC PROGRAM 53-530 Public Health - Madison and Dane County WIC		Misuse of checks is subject to state or federal prosecution. Void if altered.		75-1248 919 Payable through FSMC, Lake Lillian, MN Acct # 802732	DATE OF USE Nov 15, 2007 LAST DATE TO USE Dec 14, 2007					
Valid For These Items Only - No Substitutions 1 * Half-gallon Lactose Reduced or Lactose Free Milk Altered VOID - Do Not Redeposit W-31 1898				Actual \$ Amounts <table border="1"> <tr> <td>\$ Correction Only</td> <td>Cashier's Initials AB</td> <td rowspan="2">1287</td> </tr> <tr> <td colspan="2">\$ 3.29</td> </tr> </table>		\$ Correction Only	Cashier's Initials AB	1287	\$ 3.29	
\$ Correction Only	Cashier's Initials AB	1287								
\$ 3.29										
Deposit Within 45 Days From the First Date to Use				Pay to the Order of WIC Vendor No. Not Payable Without Authorized Stamp Participant: Do Not Sign Until Time of Purchase  Cashier: Do Not Accept If Already Signed - Must Match Signature ID						

⑈06485763⑈ ⑆091912482⑆ 802732⑈

Reminders:

Do not accept an altered WIC check. A vendor should never accept an altered check or alter the check during the redemption process. Examples of alterations include, but are not limited to: alterations in the dates to use or food items listed on the check, dollar amount blackened-out, or correction fluid used.

SUMMARY OF CHECK REJECTION REASONS AND VENDOR'S LIABILITY	
Checks fails to clear WIC's bank within 45 days of First Date to Use	Vendor is liable See page 17
Check deposited without the authorized WIC vendor stamp	See page 21
Participant or proxy signature was not obtained at the time of purchase	Vendor is liable See page 20
Accepted an altered WIC check or altered a check	Vendor is liable See page 23
Unauthorized vendor stamp used	Vendor is liable See page 22
Vendor stamp impression illegible	See page 21
Unreasonable dollar amount for the foods specified on the check	See page 18
Check accepted prior to being authorized by the WIC Program	Vendor is liable See page 22
Stop payment	See page 16

SITE VISITS BY WIC PROGRAM REPRESENTATIVES - WHAT TO EXPECT

A WIC Program representative may come to the store at any time to conduct a site visit. The reasons for conducting a site visit may include, but are not limited to:

1. high prices;
2. high volume of WIC sales;
3. high number of rejected WIC checks;
4. analysis of check redemption records;
5. suspected failure to comply with Program requirements;
6. complaints received by the local WIC project or State WIC Office; and
7. random selection.

There are several types of monitoring activities that may be conducted by the WIC Program representatives during a site visit. These include:

Compliance visit/buy - A WIC Program representative verifies that the vendor is correctly processing WIC checks by posing as a WIC participant and spending WIC checks at the check-out counter. The WIC Program representative may inform the cashier or manager of the visit after the visit has been conducted or leave the store and allow the checks to continue through the banking system. A compliance buy will often take place during a monitoring visit and compliance review.

Monitoring/Compliance review- A visit to an authorized WIC vendor by a WIC Program representative to verify stock levels, prices and general compliance with WIC Program procedures. This will often include a compliance buy.

State WIC Office staff or other representatives of the WIC Program may request inventory records showing all purchases, wholesale and retail, in the form of invoices that identify the quantity and prices of specific WIC foods, books of account, and other pertinent records that are necessary to substantiate the volume of food sold and prices charged through WIC check redemptions.

Training sessions

In addition, WIC Program representatives visit vendors to conduct training sessions. A vendor training session is one in which a WIC Program representative clarifies program procedures. Training is required before initial authorization, when some types of violations of Program requirements are observed during a monitoring or compliance visit and during vendor reapplication. Local WIC project staff at the request of vendors may also conduct training. Training sessions are also held at a site designated by the local WIC project or the State WIC Office.

Monitoring by Local or State Agency Staff

During a monitoring visit, a WIC Program representative will generally do the following, not necessarily in the order listed.

1. Ask to speak to the owner, manager or head cashier.
2. Ask about any changes at the store such as changes in ownership, management, etc.
3. Ask to see the *Vendor Manual*. Each store must have one readily available.
4. Verify that *WIC Approved Foods* lists are available. Each store must have one at each functioning cash register.
5. Ask to see any redeemed WIC checks in the store that have not yet been deposited in the bank. These must be provided for review when requested.
6. Ask about in-store WIC training of new cashiers.
7. Ask about materials that are used to train new cashiers; for example, the *Vendor Manual*, the *Vendor and Cashier Training DVD/Video*, etc.
8. Go through the store to see if minimum stock requirement of WIC approved foods, as listed in the most recent *Stock Price Survey* or this *Vendor Manual*, are available in the customer area of the store, the prices are posted on the foods or in close proximity to the foods and if the foods are fresh and not outdated.
9. Observe the cleanliness of the store and whether coolers and freezers containing WIC approved foods are working properly.
10. Conduct a compliance buy posing as a WIC participant and redeeming a WIC check. The compliance buy is used to verify if the vendor is following correct check redemption procedures. For example, the WIC Program representative may attempt to purchase foods that are not WIC approved or quantities of foods in excess of the quantity specified on the check.
11. Discuss the results of the monitoring visit with the owner, manager or head cashier. A training may be conducted to discuss problems noted to prevent reoccurrence. The WIC Program representative will summarize the results of the monitoring visit in a follow-up letter. Any follow-up actions required of the Program representative or the vendor will be included in the letter.
12. Ask if the vendor has any questions about the visit, about WIC participants, or about the Program.

FAILURE TO COMPLY WITH PROGRAM REQUIREMENTS

Vendors authorized to participate in the WIC Program must agree to abide by the Program's policies and procedures as stated on the *Wisconsin WIC Retail Vendor Application Form*, the *Stock Price Survey*, the Agreement Between the State of Wisconsin, this *Vendor Manual*, Wis. Stat. § 253.06, Wis. Admin. Code § HFS 149, 7 C.F.R. § 246, and other written notices.

The obligations agreed to in the signed agreement are binding and contractual. The sanctions for fraud or abuse are included in a copy of the Agreement found in the Appendix.

Authorized vendors should note that disqualifications from WIC are taken into account by the federal Food Stamp Program and may result in a store losing authorization to do business under the Food Stamp Program. Such disqualification may not be subject to administrative or judicial review under the Food Stamp Program.

APPEAL PROCESS

The State WIC Office shall begin actions by serving upon the vendor written notice of the action by certified mail to the address of record with the WIC Program or by personal delivery.

A vendor applicant or authorized vendor desiring to contest a State WIC Office action for denial of an application or disqualification from authorization may request a hearing. The request shall be in writing and shall be received by the Division of Hearings and Appeals within 15 days following the vendor's receipt of State WIC Office notification of the penalty.

The mailing address is as follows:

Division of Hearings and Appeals
P.O. Box 7875
Madison, WI 53707

Appeals may be delivered in person to that office at 5005 University Avenue, Room 201, Madison, WI. Requests for an abbreviated review should be addressed or hand delivered in person to the WIC Director, 1 W. Wilson Street, Room 243, Madison, WI 53703.

If the hearing request is submitted in accordance with the above procedure, the Department shall hold a hearing and issue a final decision within 60 days after the date on which the request for a hearing was received by the Division of Hearings and Appeals.

A vendor may reschedule the hearing date no more than twice. A first request to reschedule the hearing shall be granted by the Division of Hearings and Appeals upon specific request to that Office. A request to reschedule the hearing a second time shall be granted by the only for good cause. Good cause occurs when the vendor's representative cannot attend the scheduled hearing due to circumstances beyond his or her control, including but not limited to serious illness, unavailability of transportation to the hearing site due to mechanical problems, or severe weather conditions.

The State WIC Office may reschedule the hearing date under circumstances comparable to those stated above.

Hearings shall be conducted in accordance with Wis. Stat. §§ 227.44 to 227.50. The final hearing decision is subject to judicial review under Wis. Stat. § 227.52.

The hearing site will be designated by the Division of Hearings and Appeals. Hearings are usually held in Madison.

If the action being appealed involves the discontinuation of current vendor status, the vendor may continue to participate in the WIC Program until the Department issues a final administrative decision. If the final administrative decision is against the discontinued vendor, the vendor may not continue to participate in the WIC Program pending judicial review, unless a stay of enforcement is ordered pursuant to Wis. Stat. § 227.54.

MANAGER AND CASHIER TRAINING OUTLINE

Vendors are responsible for the acts of their employees related to the WIC Program and for ensuring that all employees who process checks are trained in the correct procedures for accepting WIC checks. There are several educational materials and guidelines available to assist vendors in their training activities. All may be photocopied or are available from the WIC Program.

1. TRAINING MATERIALS

- Vendor Manual - Contains program rules and the following that may be photocopied and distributed at training:
 - a. WIC IS..." - The introduction to the *Vendor Manual*. This is especially useful if the *Cashier and Manager Training DVD/Video* is not used as part of the training.
 - b. The Cashier Section:
 - 1. A Message for Cashiers - This provides important tips for cashiers to properly process WIC checks.
 - 2. *Cashier instructions for Accepting Wisconsin WIC Checks* – A copy of the publication listed bellowed.
 - 3. WIC ID – Reviews the steps to compare the information on the WIC ID with the WIC checks.
 - 4. Cashier Quizzes
 - Scenarios from the *Cashier Training DVD/Video*
 - Additional questions to test cashier's knowledge of WIC approved foods and the procedures to accept WIC checks.
- Cashier and Manager Training DVD/Video – A copy of either the DVD or videotape is provided to each WIC authorized vendor. The training describes the WIC approved foods, the correct process for accepting WIC checks, and the rights and responsibilities of authorized WIC vendors.
- WIC Approved Foods - Brochure includes color photos of WIC approved foods and is designed to be used by cashiers and participants. See Appendix for the *Vendor Order* form.

- *Cashier Instructions for Accepting Wisconsin WIC Checks* - The step-by-step process for redeeming a WIC check is described in detail. See Appendix for the *Vendor Order* form.

2. TRAINING NEW MANAGERS

- a. View the Cashier and Manager sections of the training DVD/video provided by the State WIC Office.
- b. Review the *WIC Approved Foods* list and *Cashier Instructions for Accepting Wisconsin WIC Checks*.
- c. Read all sections of the *Vendor Manual* carefully.
- d. Complete the quizzes in Cashier section of *Vendor Manual* and review the answers.
- e. Review the statutes, rules, and regulations.

3. TRAINING NEW CASHIERS

- a. View the Cashiers' section of the training DVD/video provided by the State WIC Office.
- b. Review the *Cashier Instructions for Accepting Wisconsin WIC Checks*.
- c. Review *WIC Approved Foods* list.
- d. Review the Cashiers' section of *Vendor Manual*.
- e. Provide each cashier with a copy of "A Message for Cashiers" to review (page 30 of *Vendor Manual*.)
- f. Complete the quizzes in Cashier section of *Vendor Manual* - Use *WIC Approved Foods* list for reference.
- g. Review and discuss the answers to the quizzes.
- h. Review program rules and sanctions.
- i. Review store policies and procedures related to WIC transactions.

CASHIER'S SECTION

A MESSAGE FOR CASHIERS

Your store has elected to participate as a vendor in the Wisconsin WIC Program. Participation in the WIC Program is good for business as WIC participants purchase other grocery items in addition to the foods they purchase with WIC checks. Using WIC checks requires that participants be extra careful shoppers because there are specific approved foods that must be selected. They receive training on the approved foods at the local WIC project but must locate the items at the store. Cashiers play a major role in the success of the WIC Program by assisting participants and ensuring that they receive only the supplemental foods intended by the Program. These are the foods that will improve their chances of staying healthy and decrease their need for costly medical services. WIC is a nutrition and health program that needs your help to continue its success for women, infants and children.

The WIC Program requires that cashiers have knowledge of the approved foods, follow specific steps when processing WIC checks and learn store policies and procedures related to WIC transactions. Training materials have been provided to assist cashiers.

We appreciate the assistance cashiers provide in WIC's success. Thank you!

WIC QUICK TIPS FOR CASHIERS - Use the following tips to properly process WIC checks:

DO

- Accept only *Wisconsin* WIC checks.
- Check the dates on the check to make sure that today's date is within the First Date to Use and Last Date to Use.
- Ask participants and proxies to separate WIC approved foods from their non-WIC purchases.
- If participants are using more than one WIC check at the same time, ask them to separate the foods according to the foods listed on each check.
- Make sure the participant has selected the correct type and quantity of approved food items as specified on the check.

Example: WIC check specifies concentrated liquid formula and participant has selected powder in error.

- Make sure the dollar amount is correct on the check. The total should reflect all store specials, coupons, discounts, or other reduced prices extended to non-WIC customers.
- Allow participants to use coupons and receive free items offered to all customers by the manufacturer or by your store. For example:
 - deduct the coupon amount from the cost of the WIC foods.
 - allow participants to receive more than the WIC check specifies when "free ounces" or "buy one, get one free" promotions are offered. (If there is a buy one box and get one box free offer, or a bonus size container that offers two free ounces of the product, the cost to WIC is the price for one box or the size specified on the WIC check.)
 - allow participants to receive a free item when a bonus club, coupon or other store offer is available and the WIC purchase meets the requirements. (If the WIC foods cost \$25 and the store is offering free lettuce with a \$20 purchase, the participant may receive the lettuce.)

- Have the participant sign the check after you enter the dollar amount.
- Compare the signature on the check with signature on the WIC ID.
- Write "WIC" on the receipt if your store's endorsement does not identify the purchase as a WIC purchase.
- Always treat WIC customers as courteously as you would any other customer. Your store's agreement with the Program requires it, and it's good for business.
- Refer participants to the store manager if there is a problem.

DO NOT

- Do not accept WIC checks before the First Date to Use or after the Last Date to Use.
- Do not substitute foods not approved by the WIC Program for approved foods. WIC checks are good **only** for the food items specified on them.

Example: Do not substitute Sunny D® fruit drink for Juicy Juice® or Froot Loops® for plain Cheerios®.

- Do not give WIC Participants "Rain Checks" or credit for future purchases.

If the store is out of an item specified on the check, the participant should be instructed to come back at another time when all of the items on the check are available to be purchased, or use the check at another store.

- Do not require that a WIC participant purchase all foods listed on a WIC check.
- Do not allow foods purchased with WIC checks to be returned for exchanges or refunds.
- Do not accept altered WIC checks or alter them.

Information printed on the check should not be changed or written over by anyone. However, local WIC project staff may cross off food items. If only a line is drawn through the item, the check should be accepted. The participant should not receive the food items that are crossed out.

Correction fluid may not be used on a check by anyone.

- Do not accept a WIC check signed by a person whose signature is not on the WIC ID.
- Do not ask for any other form of identification.
- Do not limit the number of WIC checks that a participant may spend at one time.
- Do not accept pre-signed WIC checks.

CASHIER INSTRUCTIONS FOR ACCEPTING WISCONSIN WIC CHECKS

Please complete the following steps when accepting a WIC check:

PARTICIPANT NAME: Jane Doe	FAMILY ID / PARTICIPANT ID: 13458/2041055	CHECK # 00020126	FIRST DATE TO USE Oct 25, 2005			
WISCONSIN WIC PROGRAM 53-530 City of Madison WIC		75-1248 919 Payable through FSMC, Lake Lillian, MN Acct # 802732		DATE OF USE Nov 23, 2005		
Valid For These Items Only - No Substitutions 2 * Gallon Low Fat or Fat Free Milk 1 * Lb (16 ounces) or less Cheese 1 * Dozen Eggs * 18 ounces or less Peanut Butter (Or 1 * 16 oz or less bag Dry Beans/Peas) 2 * 11.5 or 12 oz frozen or 46 oz cans or bottles Juice * 36 ounces or less Cereal		Actual \$ Amounts <table style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> \$ Correction Only <div style="border: 1px solid black; height: 20px; width: 100%;"></div> </td> <td style="width: 50%; vertical-align: top;"> Cashier's Initials <div style="border: 1px solid black; height: 20px; width: 100%;"></div> </td> </tr> </table>			\$ Correction Only <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Cashier's Initials <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
\$ Correction Only <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Cashier's Initials <div style="border: 1px solid black; height: 20px; width: 100%;"></div>					
Deposit Within 45 Days From the First Date to Use		Pay to the Order of WIC Vendor No. Participant: Do Not Sign Until Time of Purchase				
		Cashier: Do Not Accept If Already Signed - Must Match Signature ID				

|| 000 20 1 26 || 1209 19 1 24 8 21 80 273 2 ||

1. **Verify the family ID number on the check and on the WIC ID.** The family ID number on the check and the WIC ID must match or the check must be refused.
2. **Verify the First Date to Use.** Do not accept if today's date is before the first date to use.
3. **Verify the Last Date to Use.** Do not accept if today's date is after the last date to use.
4. **Write the Date of Use.**
5. **Compare the Foods Purchased with the Foods Listed on the WIC Check.** Food items purchased must match foods identified on the check and must be included on the WIC Approved Food List. The quantity must be equal to or less than the quantity specified. Participants are not required to purchase all items.
6. **Write the Total Dollar Amount for WIC Foods Actually Purchased in Permanent Ink.** If an error is made during the transaction, the dollar amount may be corrected by drawing a single line through the incorrect amount and writing the corrected amount in the \$ Correction Only box above.
7. **Cashier Writes Their Initials.**
8. **Obtain the Signature of the Participant or Proxy.**
9. **Verify the Signature with the Signature on the WIC ID.** The signature must match or the check must be refused.
10. **General Information.**

Only accept Wisconsin WIC checks.

Do not accept altered checks. Do not alter the checks during checkout by using correction fluid or writing over preprinted information on a check.

The cost of foods purchased with WIC checks must reflect all store specials, coupons, discounts, or other reduced prices extended to non-WIC customers. Participants are eligible to receive "free" ounces, "free" foods offered by the manufacturer, or free items offered to all customers by your store.


No money may be exchanged and no "rainchecks" or credit may be given.

If more than one check is used, be sure that the correct dollar amount is entered on each check and that all of the checks are signed by the participant after the dollar amount is entered.

1. Verify the Family ID number written here with the Family ID number on the WIC check.

3. Refer the participant to the local WIC Project indicated in this area if there is a problem. Notify the local Project if lost checks are found.

2. Signature of the WIC customer must be on the WIC ID prior to check-out, or check should not be accepted. Verify the signature written on the check at the time of the purchase with the signature on the WIC ID.

WISCONSIN WIC ID (Identification)	
53-530 Public Health - Madison and Dane County WIC 2202 S Park Street Madison, WI 53713 608-267-1111	
Only the persons listed to the right may pick up the checks and use them at a WIC approved store. The person spending the check must sign this WIC ID before shopping for the WIC foods.	Family ID: 956672 Guardian: Jane Doe Signature: <i>Jane Doe</i>
Sólo las personas que se mencionan a la derecha pueden pasar a buscar los cheques y utilizarlos en una tienda aprobada por WIC. La persona que usa el cheque debe firmar esta identificación personal de WIC antes de comprar los alimentos de WIC.	Proxy: Peter Doe Signature: <i>Peter Doe</i>
USDA is an Equal Opportunity Provider and Employer	Proxy: None Signature:

Remember:

- No other form of ID may be requested.
- Information on the WIC ID is confidential.

CASHIER QUIZZES

A. Questions from the *Cashier Training DVD*

Scenario 1

Your store doesn't have enough of the formula listed on the WIC check to give the participant all the formula they should get. What do you do?

- a) inform the participant that they may shop at another store
- b) substitute another type of formula
- c) give a rain check and have the participant return when the store receives more formula
- d) inform the participant that they can accept less formula than is specified on the check and that they will not be able to get the remaining cans of formula

Scenario 2

An item listed on the check was missed and not included in the total price. The total price is already written on the check. Which of the following options are appropriate?

- a) nothing can be done and the participant is denied the foods because it wasn't rung up with the other WIC items
- b) add the price of the item missed to the previous total, draw a line through the incorrect price, and enter the new price in the \$ Correction Box on the check
- c) give the WIC participant the food without changing the price on the check.

Scenario 3

What do you do if the WIC participant doesn't have their WIC ID?

- a) allow them to use the WIC check because you know them personally
- b) have the participant return to make their purchase with the WIC ID
- c) ask for another form of ID such as a driver's license or state ID.

Scenario 4

A WIC participant presents the following check. The check includes two gallons of 1% or skim milk, one 64 oz bottle of juice and 16 oz. or less of whole wheat or whole grain food. Which of the following are not allowed on this check?

- 1 gallon whole milk
- 1 gallon 1% milk
- 64 oz. bottle Juicy Juice (apple flavor)
- 16 oz. package flour tortillas

B. Test your knowledge of WIC approved foods and the process to accept WIC checks.

PARTICIPANT NAME: Jane Kaleida		FAMILY ID / PARTICIPANT ID: 273950/373131		CHECK # 09227019	FIRST DATE TO USE Nov 14, 2008						
WISCONSIN WIC PROGRAM 05-050 Waukesha County WIC		Misuse of checks is subject to state or federal prosecution. Void if altered.		751248 Payable through FSMC, Lake Orion, MI Acct #	DATE OF USE						
Valid For These Items Only - No Substitutions \$8.00 Approved Fruit and/or Vegetables (fresh, frozen, canned) Not Valid at Farmers' Markets or Roadside Stands		Actual \$ Amounts		Pay to the Order of WIC Vendor No.							
		<table border="1"> <tr> <td>\$ Correction Only</td> <td>Cashier's Initials</td> </tr> <tr> <td colspan="2"> <table border="1"> <tr> <td>\$</td> <td></td> </tr> </table> </td> </tr> </table>		\$ Correction Only	Cashier's Initials	<table border="1"> <tr> <td>\$</td> <td></td> </tr> </table>		\$		Not Payable Without Authorized Stamp	
\$ Correction Only	Cashier's Initials										
<table border="1"> <tr> <td>\$</td> <td></td> </tr> </table>		\$									
\$											
Deposit Within 45 Days From the First Date to Use		Participant: Do Not Sign Until Time of Purchase									
		Cashier: Do Not Accept If Already Signed - Must Match Signature ID									

⑆09227019⑆ ⑆091912965⑆ 802721⑆

The WIC check above has been presented to make a WIC purchase. Put a checkmark by the allowed foods or allowed payment processes.

- ☐ cut fruit from the salad bar
- ☐ bag of mixed greens
- ☐ bag of romaine lettuce with shredded cabbage and carrots
- ☐ bag of Caesar salad with lettuce, cheese and dressing
- ☐ half of watermelon
- ☐ bag of Fuji apples
- ☐ bunch fresh cilantro
- ☐ jar Hunts spaghetti sauce
- ☐ Hunts Fire Roasted Diced Tomatoes with Garlic
- ☐ bag russet (white) potatoes
- ☐ box frozen broccoli with cheese sauce
- ☐ box of frozen lima beans
- ☐ package of frozen stew vegetables (carrots, onions, celery, & potatoes)
- ☐ 46 oz. jar Musselman's natural (unsweetened) applesauce
- ☐ 6 pk (4 oz. cups) Musselman's applesauce
- ☐ Canned pears in 100% juice
- ☐ Canned peaches in light syrup

- ☐ 32 oz. jar sauerkraut
- ☐ 29 oz can of mixed vegetables with potatoes
- ☐ bag of organic grown apples
- ☐ \$7.90 purchase of allowed fruit and vegetables and give \$0.10 change
- ☐ \$7.90 purchase of allowed fruit and vegetables and give no change
- ☐ \$8.50 purchase of allowed fruit and vegetables and allow the participant to pay \$.50 cash
- ☐ \$5.00 purchase of allowed fruit and vegetables and give a rain check for \$3.00

PARTICIPANT NAME: Gabby Smith		FAMILY ID / PARTICIPANT ID: 344164/443601		CHECK # 09240209	FIRST DATE TO USE Oct 12, 2009
WISCONSIN WIC PROGRAM 53-530 Public Health - Madison and Dane County WIC		Misuse of checks is subject to state or federal prosecution. Void if altered.		75-1348 919 Payable through PSMC, Lake Union, MN Acct # 802732	DATE OF USE LAST DATE TO USE Nov 10, 2009
Valid For These Items Only - No Substitutions				Actual \$ Amounts	
2 * Gallon low fat (1%) or fat free (skim) Milk 1 * 16 (1 lb) or less cheese * 36 oz or less cereal 1 * 11.5 or 12 oz frozen or 46-48 oz container Juice 1 * Dozen Eggs 3 * 5 oz cans light tuna OR 1*14.75 oz can pink Salmon * 18 oz or less Peanut Butter 4 * 14-16 oz cans Beans/Peas or 1 lb. dried Beans/Peas 1 * 16 oz (1 lb) or less Whole Wheat/Whole Grain				\$ Correction Only	Cashier's Initials
				Pay to the Order of WIC Vendor No.	
				Not Payable Without Authorized Stamp	
Deposit Within 45 Days From the First Date to Use				Participant Do Not Sign Until Time of Purchase	
				Cashier: Do Not Accept If Already Signed - Must Match Signature ID	



The

WIC check above has been presented to make a WIC purchase. Put a checkmark by the individual foods or combinations of foods that would be allowed.

Juice

- ☐ 12 oz. frozen Old Orchard lemonade
- ☐ 48 oz. bottle Ocean Spray Cranberry juice cocktail
- ☐ 12 oz. frozen Old Orchard Apple Cherry juice (green lid)
- ☐ 46 oz. bottle V8 100% Vegetable juice- Lemon Twist
- ☐ 64 oz. refrigerated carton Tropicana Pure Premium Orange Juice with Calcium and Vitamin D
- ☐ 46 oz. plastic bottle Northland Cranberry Raspberry juice
- ☐ 46 oz. can Seneca apple juice
- ☐ 46 oz. plastic bottle V8 V.Fusion Peach Mango
- ☐ 12 oz. frozen Old Orchard Fruit Punch juice cocktail (white lid)
- ☐ 64 oz. plastic bottle Juicy Juice Apple Grape

- ☐ 46 oz. plastic bottle Welch's 100% Grape juice
- ☐ One 46 oz. plastic bottle Juicy Juice Grape and one 12 oz. frozen orange juice
- ☐ 46 oz. can Juicy Juice Harvest Surprise Tropical
- ☐ 12 oz. frozen Minute Maid Orange Passion Juice with Calcium
- ☐ 11.5 oz. bottle frozen Langers Winter Blend juice

Cereal

- ☐ 10.4 oz. box Berry Burst Cheerios
- ☐ Combination of 15 oz. Quaker Life (plain), 9 oz. box Multi Grain Cheerios, 14 oz. Wheat Chex
- ☐ 8.9 oz. box Cheerios cereal
- ☐ Combination of 8 oz. box Gerber Rice Infant Cereal and 28 oz. box CoCo Wheats
- ☐ 18 oz. bag Malt-O-Meal Frosted Mini Spooners
- ☐ 10.5 oz. box Kellogg's Rice Krispies with Real Strawberries
- ☐ 18 oz. canister Quaker Old Fashioned Oats
- ☐ 12 oz. box Quaker Instant Grits- Butter flavor (individual packets)

Milk

- ☐ 2 half gallons milk in glass bottle
- ☐ 2 gallons whole milk (also called Vitamin D or homogenized milk)
- ☐ 2 gallons low fat chocolate milk
- ☐ 4 half gallons LACTAID lactose free whole milk
- ☐ 2 gallons low fat (1%) milk (any brand)
- ☐ 2 gallons organic low fat (1%) milk

Cheese

- ☐ two 8 oz. packages of string cheese (not individually wrapped)
- ☐ 12 oz. Kraft Singles American cheese product (individually wrapped)
- ☐ 16 oz. block of Swiss cheese
- ☐ 16 oz. package shredded mozzarella cheese
- ☐ 16 oz. Kraft Deli Deluxe 2% Milk American (processed American cheese slices)

Peanut Butter

- ☐ 16.3 oz. creamy Skippy peanut butter
- ☐ 18 oz. reduced fat Skippy creamy peanut butter spread
- ☐ 18 oz. creamy peanut butter and 1 lb. dried pinto beans
- ☐ 16 oz. Smuckers Natural chunky peanut butter (not refrigerated)

Beans

- ☐ 4 cans 16 oz. pork and beans
- ☐ 2 cans 16 oz. pinto beans and 2 cans 16 oz. kidney beans
- ☐ 4 cans 15 oz. La Preferida refried beans (authentic)
- ☐ 4 cans 16 oz. black eyed peas and 1 lb. dried pinto beans
- ☐ Jalapeno black-eyed peas with slab bacon

Eggs

- ☐ 1 carton (1 dozen) vegetarian eggs
- ☐ 1 carton (1 dozen) jumbo eggs
- ☐ 1 carton (18 eggs) large eggs
- ☐ 1 carton (1 dozen) brown eggs

Tuna/Salmon

- ☐ 3 cans 5 oz. chunk white albacore tuna
- ☐ 5 pouches 3 oz. chunk light tuna
- ☐ 3 cans 5 oz. Starkist chunk light tuna in oil
- ☐ 3 cans 5 oz light tuna and 1 can 14.75 oz pink salmon)
- ☐ 1 can 14.75 oz pink salmon

Whole Wheat/Whole Grain Food

- ☐ 16 oz. package Mission flour tortillas
- ☐ 16 oz. Bucky Badger whole wheat tortillas
- ☐ 10 oz. package Azteca soft corn tortillas
- ☐ 12 oz. package Pepperidge Farm 100% whole wheat buns
- ☐ 12 oz. package Sara Lee Soft Wheat buns
- ☐ 20 oz. South Beach Living Whole Wheat tortilla wraps
- ☐ 8.7 oz. Ortega yellow corn taco shells

PARTICIPANT NAME: Gabby Smith		FAMILY ID / PARTICIPANT ID: 344164/443601		CHECK # 09240209	FIRST DATE TO USE Oct 12, 2009
WISCONSIN WIC PROGRAM 53-530 Public Health - Madison and Dane County WIC		Misuse of checks is subject to state or federal prosecution. Void if altered.		75-1348 919 Payable through PSMC, Lake Union, MN Acct # 802732	DATE OF USE LAST DATE TO USE Nov 10, 2009
Valid For These Items Only - No Substitutions * 24 oz Gerber infant cereal				Actual \$ Amounts \$ Correction Only Cashier's Initials	
				Pay to the Order of WIC Vendor No.	
				Not Payable Without Authorized Stamp	
Deposit Within 45 Days From the First Date to Use				Participant Do No. Sign Until Time of Purchase	
				Cashier Do Not Accept If Already Signed - Must Match Signature ID	

⑈09240209⑈ ⑆091912965⑆ 802721⑈

The WIC check above has been presented to make a WIC purchase. Put a checkmark by the individual foods or combinations of foods that would be allowed.

- ☐ 8 oz. canister Gerber rice cereal with DHA
- ☐ 14 oz. box Cheerios (plain)
- ☐ 8 oz. Beechnut rice infant cereal
- ☐ one 16 oz. Gerber rice infant cereal and one 8 oz. box Gerber oatmeal infant cereal
- ☐ 8 oz. Gerber whole wheat infant cereal
- ☐ 8 oz. Gerber rice cereal with bananas
- ☐ 3 boxes 8 oz. Gerber organic oatmeal cereal

PARTICIPANT NAME: Gabby Smith		FAMILY ID / PARTICIPANT ID: 344164/443601		CHECK # 09240209	FIRST DATE TO USE Oct 12, 2009
WISCONSIN WIC PROGRAM 53-530 Public Health - Madison and Dane County WIC		Misuse of checks is subject to state or federal prosecution. Void if altered.		75-1248 919 Payable through FSMC, Lake Lillian, MN Acct # 802732	DATE OF USE LAST DATE TO USE Nov 10, 2009
Valid For These Items Only - No Substitutions 9 * 2-pack 3.5 oz Gerber 2 nd Foods Fruits or Vegetables				Actual \$ Amounts Pay to the Order of WIC Vendor No.	
				\$ Correction Only	Cashier's Initials
				\$	
				Not Payable Without Authorized Stamp	
Deposit Within 45 Days From the First Date to Use				Participant: Do Not Sign Until Time of Purchase	
				Cashier: Do Not Accept If Already Signed - Must Match Signature ID	

⑈09240209⑈ ⑆091912965⑆ 802721⑈

The WIC check above has been presented to make a WIC purchase. Put a checkmark by the individual foods or combinations of foods that would be allowed.

- ☐ 2 pack (3.5 oz) Gerber 2nd Foods Banana and Apple Dessert
- ☐ 2 pack (3.5 oz) Gerber 2nd Foods Mixed Vegetables
- ☐ 2 pack (3.5 oz) Gerber 2nd Foods Apple Strawberry Banana
- ☐ 2 pack (3.5 oz) Gerber Organic 2nd Foods sweet potatoes
- ☐ 4 oz. jar Gerber 2nd Foods bananas
- ☐ 4 oz. jar Gerber 2nd Foods sweet potatoes and turkey dinner
- ☐ 2 pack (3.5 oz) Gerber 2nd Foods peaches

PARTICIPANT NAME: Gabby Smith		FAMILY ID / PARTICIPANT ID: 344164/443601		CHECK # 09240209	FIRST DATE TO USE Oct 12, 2009
WISCONSIN WIC PROGRAM 53-530 Public Health - Madison and Dane County WIC		Misuse of checks is subject to state or federal prosecution. Void if altered.		75-1248 919 Payable through FSMC, Lake Lillian, MN Acct # 802732	DATE OF USE LAST DATE TO USE Nov 10, 2009
Valid For These Items Only - No Substitutions 15 * 2.5 oz jars baby Meats				Actual \$ Amounts Pay to the Order of WIC Vendor No.	
				\$ Correction Only	Cashier's Initials
				\$	
				Not Payable Without Authorized Stamp	
Deposit Within 45 Days From the First Date to Use				Participant: Do Not Sign Until Time of Purchase	
				Cashier: Do Not Accept If Already Signed - Must Match Signature ID	

⑈09240209⑈ ⑆091912965⑆ 802721⑈

The WIC check above has been presented to make a WIC purchase. Put a checkmark by the individual foods or combinations of foods that would be allowed.

- ☐ 2.5 oz. Beechnut Stage 1 beef and beef broth
- ☐ 4 oz. Gerber 2nd Foods Vegetable Beef dinner

☐ 2.5 oz. Gerber 2nd Foods chicken and chicken gravy

☐ 2.5 oz. Gerber Graduates Lil' Sticks meat sticks

PARTICIPANT NAME: Gabby Smith		FAMILY ID / PARTICIPANT ID: 344164/443601		CHECK # 09240209	FIRST DATE TO USE Oct 12, 2009
WISCONSIN WIC PROGRAM 53-530 Public Health - Madison and Dane County WIC		Misuse of checks is subject to state or federal prosecution. Void if altered.		75-1348 919 Payable through PSMC, Lake Union, MN Acct 3 802732	DATE OF USE Nov 10, 2009
Valid For These Items Only - No Substitutions 2 * 1/2 Gal 2%, 1% or fat free (skim) lactose free milk				Actual \$ Amounts \$ Correction Only Cashier's Initials	
				Pay to the Order of WIC Vendor No.	
				Not Payable Without Authorized Stamp	
Deposit Within 45 Days From the First Date to Use				Participant Do Not Sign Until Time of Purchase	
				Cashier: Do Not Accept If Already Signed - Must Match Signature ID	

⑈09240209⑈ ⑆091912965⑆ ⑆02721⑈

The WIC check above has been presented to make a WIC purchase. Put a checkmark by the individual foods or combinations of foods that would be allowed.

☐ 2 half-gallons Dairy Ease lactose free whole milk

☐ 4 quarts LACTAID lactose free whole milk

☐ 2 half-gallons LACTAID lactose free, calcium-fortified, reduced fat (2%) milk

Put a check mark by the correct check-out procedures:

- ☐ Accept a check if today's date is after the Last Date to Use.
- ☐ Refuse a check if today's date is prior to the First Date to Use.
- ☐ Refuse a check if any information on the check has been altered (example- dates, food quantities).
- ☐ Use correction fluid to correct any error on the check.
- ☐ Ask the participant to sign the check before entering the date of use and dollar amount.
- ☐ Allow participants to use coupons with their WIC purchases. Subtract the coupon amount from the total purchase price.
- ☐ Ask for the participant's telephone number in case the store needs to contact the participant.
- ☐ Correct an error in the total price written on the check by drawing a single line through the incorrect price and enter the new price in the \$ Correction box.
- ☐ If more than one WIC check is being used, process each check separately and enter the price on the check for only the items listed on the check.
- ☐ Refuse a WIC check issued by another state.
- ☐ Ask for additional ID if the signature doesn't match the signature on the WIC ID.

A participant did not present all the foods listed on the WIC check. Put a check mark by the correct response(s).

- ☐ Include the price for the item not purchased in the total price entered on the check.
- ☐ Ask participant if they wish to purchase the item missed. If they do not wish to purchase the item, enter the total price for only the items purchased on the check.
- ☐ Require the participant to buy all the foods listed on the check.

What should you do if a WIC participant presents an item that you believe is not a WIC approved item? Put a check mark by the correct response(s).

- ☐ Consult the *WIC Approved Foods* list and the message on the check to verify whether the food is allowed or not.
- ☐ Contact a manager to review before allowing the purchase.
- ☐ Contact your local WIC office for further clarification.
- ☐ Allow the participant to substitute a food not specified on the check because the participant insists that other stores allow the product.

A. Answers to *Cashier Training DVD*

Scenario 1

Your store doesn't have enough of the formula listed on the WIC check to give the participant all the formula they should get. What do you do?

- a) inform the participant that they may shop at another store and
- d) inform the participant that they can accept less formula than is specified on the check and that they will not be able to get the remaining cans of formula

It is the participant's decision to shop elsewhere or to accept less formula. You should never substitute another formula or give rain checks.

Senario 2

An item listed on the check was missed and not included in the total price. The total price is already written on the check. Which of the following options are appropriate?

- b) add the price of the item missed to the previous total, draw a line through the incorrect price, and enter the new price in the \$ Correction Box on the check

Scenario 3

What do you do if the WIC participant doesn't have their WIC ID?

- b) have the participant return to make their purchase with the WIC ID

You must compare the signature on the check with the WIC ID for all WIC transactions. You are not allowed to ask for any other form of identification.

Scenario 4

A WIC participant presents the following check. The check includes two gallons of 1% or skim milk, one 64 oz bottle of juice and 16 oz. or less of whole wheat or whole grain food. Which of the following are not allowed on this check?

The gallon whole milk and 16 oz package of flour tortillas are not allowed. Whole milk (also called Vitamin D or homogenized milk) is not allowed as this check only allows 1 % (low-fat) or skim (fat-free) milk.

B. Answers for the “Test your knowledge of WIC approved foods and the process to accept WIC checks.”

Put a checkmark by the individual foods or combinations of foods that would be allowed.

- ☐ cut fruit from the salad bar **(Items from the salad bar are not allowed.)**
- ☒ bag of mixed greens
- ☒ bag of romaine lettuce with shredded cabbage and carrots
- ☐ bag of Caesar salad with lettuce, cheese and dressing **(Only fruit and vegetables are allowed.)**
- ☒ half of watermelon **(Cut fruit is allowed.)**
- ☒ bag of Fuji apples
- ☐ bunch fresh cilantro **(Herbs are not allowed.)**
- ☐ jar Hunts spaghetti sauce **(Only tomato sauce is allowed. No spaghetti, lasagna, or pizza sauce is allowed.)**
- ☒ Hunts Fire Roasted Diced Tomatoes with Garlic
- ☐ bag russet (white) potatoes **(Potatoes are not allowed except sweet potatoes and yams.)**
- ☐ box frozen broccoli with cheese sauce **(No added sauces or butter are allowed.)**
- ☒ box of frozen lima beans **(Frozen beans or mixtures with beans are allowed.)**
- ☐ package of frozen stew vegetables (carrots, onions, celery, & potatoes) **(Potatoes are not allowed except sweet potatoes and yams. Mixtures with potatoes are not allowed.)**
- ☒ 46 oz. jar Musselman’s natural (unsweetened) applesauce
- ☐ 6 pk (4 oz. cups) Musselman’s applesauce **(Individual serving containers are not allowed.)**
- ☒ Canned pears in 100% juice
- ☐ Canned peaches in light syrup **(No fruit packed in any type of syrup is allowed.)**
- ☐ 32 oz. jar sauerkraut **(Pickled vegetables are not allowed.)**
- ☐ 29 oz can of mixed vegetables with potatoes **(Potatoes are not allowed except sweet potatoes and yams. Mixtures with potatoes are not allowed.)**
- ☒ bag of organic grown apples **(Organic grown fruit and vegetables are allowed on the fruit and vegetable check.)**
- ☐ \$7.90 purchase of allowed fruit and vegetables and give \$0.10 change **(Providing change is not allowed.)**
- ☒ \$7.90 purchase of allowed fruit and vegetables and give no change
- ☒ \$8.50 purchase of allowed fruit and vegetables and allow the participant to pay \$.50 cash

- ☐ \$5.00 purchase of allowed fruit and vegetables and give a rain check for \$3.00 **(No rain checks are allowed.)**

Juice

- ☐ 12 oz. frozen Old Orchard lemonade **(Juice drinks are not allowed.)**
- ☐ 48 oz. bottle Ocean Spray Cranberry juice cocktail **(Cocktails and juice drinks are not allowed.)**
- ☒ 12 oz. frozen Old Orchard Apple Cherry juice (green lid)
- ☒ 46 oz. bottle V8 100% Vegetable juice- Lemon Twist
- ☐ 64 oz. refrigerated carton Tropicana Pure Premium Orange Juice with Calcium and Vitamin D **(64 oz. refrigerated juices are only allowed when specified on the check.)**
- ☒ 46 oz. plastic bottle Northland Cranberry Raspberry juice
- ☒ 46 oz. can Seneca apple juice **(Many approved juices are available in a 46 oz. can or bottle.)**
- ☐ 46 oz. plastic bottle V8 V.Fusion Peach Mango **(V8 V.Fusion is not allowed.)**
- ☐ 12 oz. frozen Old Orchard Fruit Punch juice cocktail (white lid) **(Juice drinks are not allowed. 100% Old Orchard juices have green lids.)**
- ☐ 64 oz. plastic bottle Juicy Juice Apple Grape **(64 oz. containers are not specified on this check and are not allowed in this situation.)**
- ☒ 46 oz. plastic bottle Welch's 100% Grape juice
- ☐ One 46 oz. plastic bottle Juicy Juice Grape and one 12 oz. frozen orange juice **(2 containers of juice presented and the check authorizes the purchase of only one container.)**
- ☐ 46 oz. can Juicy Juice Harvest Surprise Tropical **(Harvest Surprise is not allowed.)**
- ☒ 12 oz. frozen Minute Maid Orange Passion juice with Calcium **(Juices with added vitamins and minerals such as calcium are allowed.)**
- ☒ 11.5 oz. bottle frozen Langers Winter Blend juice

Cereal

- ☐ 10.4 oz. box Berry Burst Cheerios **(Only plain Cheerios and Multi-Bran Cheerios are allowed.)**
- ☐ Combination of 15 oz. Quaker Life (plain), 9 oz. box Multi Grain Cheerios, 14 oz. Wheat Chex **(38 oz. of cereal are listed and the check only allows 36 oz.)**
- ☐ 8.9 oz. box Cheerios cereal **(Boxes must be 9 oz. or larger)**
- ☒ Combination of 8 oz. box Gerber Rice Infant Cereal and 28 oz. box CoCo Wheats **(Infant cereal may be purchased.)**
- ☒ 18 oz. bag Malt-O-Meal Frosted Mini Spooners
- ☐ 10.5 oz. box Kellogg's Rice Krispies with Real Strawberries **(Only plain Rice Krispies are allowed.)**

☐ 18 oz. canister Quaker Old Fashioned Oats (**Only plain instant oatmeal in packets is allowed.**)

☒ 12 oz. box Quaker Instant Grits- Butter flavor (individual packets)

Milk

☐ 2 half gallons milk in glass bottles (**Only gallon containers are allowed on this check and glass bottles are not allowed.**)

☐ 2 gallons whole milk (also called vitamin D or homogenized milk) (**Only low fat or fat free milk is allowed on this check.**)

☐ 2 gallons low-fat chocolate milk (**Flavored milk, including chocolate milk, is not allowed.**)

☐ 4 half gallons LACTAID lactose free whole milk (**Lactose free milk may only be purchased when specified on the check.**)

☒ 2 gallons low fat (1%) milk (any brand)

☐ 2 gallons organic low-fat (1%) milk (**Organic milk is not allowed.**)

Cheese

☐ two 8 oz. packages of string cheese (not individually wrapped) (**Package must be 9 oz. or larger.**)

☐ 12 oz. Kraft Singles American cheese product (individually wrapped) (**American cheese singles are "cheese products" not natural cheeses. Individually wrapped slices are not allowed.**)

☐ 16 oz. block of Swiss cheese (**Swiss cheese is not an allowed type of cheese.**)

☐ 16 oz. package shredded mozzarella cheese (**Blocks of cheese must be purchased except for string cheese and sliced American cheese. String and American cheese must not be individually wrapped.**)

☒ 16 oz. Kraft Deli Deluxe 2% Milk American (processed American cheese slices) (**These are not individually wrapped and are allowed. Reduced fat cheeses are allowed.)**

Peanut Butter

☒ 16.3 oz. creamy Skippy peanut butter

☐ 18 oz. reduced fat Skippy creamy peanut butter spread (**Peanut butter spreads are not allowed.**)

☒ 18 oz. creamy peanut butter and 1 lb. dried pinto beans (**Both products are allowed as there is not an "or" after the peanut butter.**)

☒ 16 oz. Smuckers Natural chunky peanut butter (not refrigerated) (**Natural peanut butter is allowed if it is not refrigerated or from the health food section.**)

Beans

☐ 4 cans 16 oz. pork and beans (**Pork and beans are not allowed.**)

☒ 2 cans 16 oz. pinto beans and 2 cans 16 oz. kidney beans

- ☐ 4 cans 15 oz. La Preferida refried beans (authentic) **(Only fat free refried beans are allowed.)**
- ☐ 4 cans 16 oz. black eyed peas and 1 lb. dried pinto beans **(Must choose either 4 cans 16 oz. beans or 1 lb. dried pinto beans, not both.)**
- ☐ Jalapeno black-eyed peas with slab bacon **(Only plain beans, no added meat or other vegetables allowed.)**

Eggs

- ☐ 1 carton (1 dozen) vegetarian eggs **(Vegetarian eggs are not allowed.)**
- ☒ 1 carton (1 dozen) jumbo eggs **(All sizes of eggs are allowed.)**
- ☐ 1 carton (18 eggs) large eggs **(Only a dozen (12) eggs are allowed.)**
- ☐ 1 carton (1 dozen) brown eggs **(Brown eggs are not allowed.)**

Tuna/Salmon

- ☐ 3 cans 5 oz. chunk white albacore tuna **(Albacore tuna is not allowed.)**
- ☐ 5 pouches 3 oz. chunk light tuna **(Wrong container size and tuna in pouches is not allowed.)**
- ☒ 3 cans 5 oz. Starkist chunk light tuna in oil **(Tuna packed in oil or water is allowed.)**
- ☐ 3 cans 5 oz light tuna and 1 can 14.75 oz pink salmon **(Must choose either 3 cans 5 oz. tuna or 1 can 14.75 oz salmon, not both.)**
- ☒ 1 can 14.75 oz pink salmon

Whole Wheat/Whole Grain Food

- ☐ 16 oz. package Mission flour tortillas **(No flour tortillas are allowed.)**
- ☒ 16 oz. Bucky Badger whole wheat tortillas
- ☒ 10 oz. package Azteca soft corn tortillas
- ☒ 12 oz. package Pepperidge Farm 100% whole wheat buns
- ☐ 12 oz. package Sara Lee Soft Wheat buns **(Must be labeled 100% whole wheat.)**
- ☐ 20 oz. South Beach Living Whole Wheat tortilla wraps **(Not an allowed brand.)**
- ☐ 8.7 oz. Ortega yellow corn taco shells **(Only soft corn tortillas are allowed.)**

Infant Cereal

- ☐ 8 oz. canister Gerber rice cereal with DHA **(Infant cereal in canisters is not allowed.)**
- ☐ 14 oz. box Cheerios (plain) **(Only infant cereal is allowed.)**
- ☐ 8 oz. box Beechnut rice infant cereal **(Only Gerber brand cereal is allowed.)**
- ☒ one 16 oz. Gerber rice infant cereal and one 8 oz. box Gerber oatmeal infant cereal

- ☒ 8 oz. boxes Gerber whole wheat infant cereal
- ☐ 8 oz. boxes Gerber rice cereal with bananas (**Infant cereal with added fruit is not allowed.**)
- ☐ 3 boxes 8 oz. Gerber organic oatmeal cereal (**Organic infant cereal is not allowed.**)

Infant Fruit and Vegetables

- ☐ 2 pack (3.5 oz) Gerber 2nd Foods Banana and Apple Dessert (**Desserts are not allowed.**)
- ☒ 2 pack (3.5 oz) Gerber 2nd Foods Mixed Vegetables (**Mixtures of plain fruit or vegetables are allowed.**)
- ☒ 2 pack (3.5 oz) Gerber 2nd Foods Apple Strawberry Banana
- ☐ 2 pack (3.5 oz) Gerber Organic 2nd Foods sweet potatoes (**Organic infant fruit and vegetables are not allowed.**)
- ☐ 4 oz. jar Gerber 2nd Foods bananas (**Jars of fruit and vegetables are not allowed.**)
- ☐ 4 oz. jar Gerber 2nd Foods sweet potatoes and turkey dinner (**Jars of fruit and vegetables are not allowed. Dinners are not allowed.**)
- ☒ 2 pack (3.5 oz) Gerber 2nd Foods peaches

Infant Meats

- ☒ 2.5 oz. jar Beechnut Stage 1 beef and beef broth (**Any brand of plain infant meats are allowed with broth or gravy.**)
- ☐ 4 oz. jar Gerber 2nd Foods Vegetable Beef dinner (**Only meats in gravy or broth are allowed and therefore, dinners are not allowed.**)
- ☒ 2.5 oz. jar Gerber 2nd Foods chicken and chicken gravy
- ☐ 2.5 oz. jar Gerber Graduates Lil' Sticks meat sticks (**Meat and poultry sticks are not allowed.)**

Lactose Free Milk Check

- ☐ 2 half-gallons Dairy Ease lactose free whole milk (**Whole milk is not allowed on this check.**)
- ☐ 2 quarts LACTAID lactose free whole milk (**Quarts of milk may not be substituted and whole milk is not allowed on this check.**)
- ☒ 2 half-gallons LACTAID lactose free, calcium-fortified, reduced fat (2%) milk (**Calcium-fortified lactose free milk is allowed.**)

Put a check mark by the correct check-out procedures:

- ☐ Accept a check if today's date is after the last date to use.
- ☒ Refuse a check if today's date is prior to the first date to use.
- ☒ Refuse a check if any information on the check has been altered (example- dates, food quantities).

- ☐ Use correction fluid to correct any error on the check.
- ☐ Ask the participant to sign the check before entering the date of use and dollar amount.
- ☒ Allow participants to use coupons with their WIC purchases. Subtract the coupon amount from the total purchase price.
- ☐ Ask for the participant's telephone number in case the store needs to contact the participant.
- ☒ Correct an error in the total price written on the check by drawing a single line through the incorrect price and enter the new price in the \$ Correction box.
- ☒ If more than one WIC check is being used, process each check separately and enter the price on the check for only the items listed on the check.
- ☒ Refuse a WIC check issued by another state.
- ☐ Ask for additional ID if the signature doesn't match the signature on the WIC ID. **(No other ID may be requested.)**

A participant did not present all the foods listed on the WIC check. Put a check mark by the correct response(s).

- ☐ Include the price for the item not purchased in the total price entered on the check. **(It is a violation to charge for foods not received by the participant.)**
- ☒ Ask participant if they wish to purchase the item missed. If they do not wish to purchase the item, enter the total price for only the items purchased on the check.
- ☐ Require the participant to buy all the foods listed on the check. **(Participants may buy less than the amount specified on check. Do not issue a rain check or credit for the item that was not purchased.)**

What should you do if a WIC participant presents an item that you believe is not a WIC approved item? Put a check mark by the correct response(s).

- ☒ Consult the *WIC Approved Foods* list and the message on the check to verify whether the food is allowed or not.
- ☒ Contact a manager to review before allowing the purchase.
- ☒ Contact your local WIC office for further clarification.
- ☐ Allow the participant to substitute a food not specified on the check because the participant insists that other stores allow the product. **(It is a violation to provide foods that are not specified on the check and/or on the *WIC Approved Foods* list. No substitutions are allowed.)**

DEPARTMENT OF HEALTH AND FAMILY SERVICES

Division of Public Health
DPH 40036 (Rev. 07/07)

STATE OF WISCONSIN

7 CFR § 246.12
Wis. Stat. §253.06.
Wis. Admin. Code Ch. HFS 149

**AGREEMENT BETWEEN THE
STATE OF WISCONSIN**

Department of Health and Family Services
Special Supplemental Nutrition Program for Women, Infants and Children (WIC)
P.O. Box 2659, Madison, Wisconsin 53701-2659
and

This agreement is entered into between the Wisconsin Special Supplemental Nutrition Program for Women Infants and Children (WIC Program) of the Department of Health and Family Services, Division of Public Health, hereinafter referred to as the "department", and the above-named establishment, hereinafter referred to as the "vendor." This agreement will be for a period beginning November 1, 2007, or the initial authorization date, and will expire on October 31, 2010. The department will terminate the agreement if it determines that the vendor has provided false information in connection with its application for authorization. Either party may choose to terminate the agreement for cause after providing not less than 15 days advance written notice, subject to any applicable appeal rights under Wis. Admin. Code Ch. HFS 149.

The Vendor Agreement does not constitute a license or a property interest. If the vendor wishes to continue to be authorized beyond the period of its current agreement, the vendor must reapply for authorization. If a vendor is disqualified, the WIC Program will terminate the vendor's agreement and the vendor will have to reapply in order to be authorized after the disqualification period is over. In all cases, the vendor's new application will be subject to the vendor selection criteria and any vendor limiting criteria in effect at the time of reapplication.

A. The VENDOR Agrees To:

General terms. The vendor shall

1. Comply with the terms of this agreement and applicable WIC Program rules and regulations, including but not limited to Wis. Admin. Code ch. 149, 7 CFR § 246 and other applicable statutes, rules, and regulations; policies and procedures as stated in the completed application form, the stock price surveys, the *WIC Vendor Manual*; and further agrees to comply with amendments or updates made during the contract period, the list of approved foods, memos or other formal instructions and terms of participation issued by the State WIC Office to vendors;
2. Comply with the vendor selection criteria throughout the contract period, including any changes to the criteria;
3. Allow the State agency, as part of the redemption process, to make price adjustments to the purchase price on WIC checks submitted by the vendor for redemption to ensure compliance with the price limitations applicable to the vendor;

Discrimination. The vendor shall

4. Comply with the nondiscrimination provisions of Parts 15, 15a and 15b of Title 7 and the Age Discrimination Act of 1975 to ensure that no otherwise qualified person be excluded from participation in, be denied the benefits of, or otherwise be subject to discrimination in any manner on the basis of age, race, color, handicap, sex, or national origin under the WIC Program and will immediately take any measure necessary to effectuate this part of the Agreement;

5. Comply with Title VI of the Civil Rights Act of 1964 prohibiting employment discrimination where (1) the primary purpose of the Agreement is to provide employment, or (2) discriminatory employment practices will result in unequal treatment of persons who are or should be benefiting from the WIC Program;

General Business operations. The vendor shall

6. Provide approved WIC foods that are fresh and have not exceeded their "sell by", "best if used by" or other date limiting the sale or use of the food item;
7. Demonstrate business integrity;
8. Submit an accurately completed *Stock Price Survey* to the State WIC Office or local WIC Project upon request indicating the non-sale prices of the WIC approved foods;
9. Derive less than 50 percent of annual food sales from WIC checks;
10. Purchase infant formula provided to WIC participants only from a supplier listed on the authorized infant formula provider list;
11. When authorized as a pharmacy, order infant formulas or liquid nutritional/medical products at the request of WIC participants or the local WIC project. Pharmacies agree to have an established procedure with a distributor or manufacturer which would enable the pharmacy to supply infant formula within a reasonable time when requested by a WIC participant or the local WIC project;
12. Maintain regular, established hours of operation. This includes a minimum of two 4-hour blocks of time on each of five days per week. Daily operating hours must be consistent from week to week;
13. Use a cash register that generates receipts that include the date, the total price, and the price of each item received by the WIC participant or proxy, at each check-out lane;
14. Maintain at all times the required minimum stock of WIC approved foods in the customer area of the store for purchase by WIC Program participants. "Minimum stock" as used in this agreement shall mean the amount and kinds of food items specified on the *Stock Price Survey* and in the *WIC Vendor Manual*. (Stores with infant formula theft problems may keep infant formula in a secure area. A notice of the location and prices must be posted in the area where the participant would expect to find the formula. Minimum stock must be maintained);
15. Display the prices of WIC approved foods on the foods, on the shelves in proximity to the foods or in the immediate area where the foods are kept in the customer area of the store;
16. Maintain the establishment in a clean, orderly and safe condition;

Prohibited practices. The vendor shall

17. NOT provide coupons or certificates redeemable for cash, alcoholic beverages, tobacco products or non-WIC items, that are contingent upon the redemption of a WIC check;
18. NOT buy or sell a WIC check for cash;
19. NOT sell in exchange for a WIC check alcohol, an alcoholic beverage, a tobacco product or a non-WIC item;
20. NOT redeem WIC checks in whole or in part for cash, rain checks or other items of value or as a credit on accounts;
21. NOT provide foods in quantities greater than the quantities specified on WIC checks;
22. NOT charge participants (or their proxies) prices that are higher than prices charged to other customers;

23. NOT charge WIC participants more than the current shelf price for an approved food;
24. NOT charge for approved food not received by a WIC participant;
25. NOT provide cash for returned WIC-approved food;
26. NOT charge or collect sales tax on WIC food purchases;
27. NOT increase prices of approved foods to levels that would make the vendor ineligible for authorization;
28. NOT claim reimbursement for the sale of a specific approved food in an amount that exceeds the vendor's store's documented inventory of that food for the same period of time;
29. NOT receive or redeem a WIC check for a vendor that is not a WIC-authorized vendor;
30. NOT redeem a WIC check for food purchased or received at an address other than the store address that appears on the authorized vendor's application;
31. NOT deposit a WIC check into a bank account other than the authorized vendor's bank account;
32. NOT contact, question, or seek restitution from participants, parents, caretakers, or proxies for WIC checks not paid or partially paid by the WIC Program;
33. NOT provide refunds or permit exchanges for authorized supplemental foods obtained with WIC checks, except for exchanges of an identical authorized supplemental food item when the original item is defective, spoiled or has exceeded its "sell by" "best if used by" or other date limiting the sale or use of the food item. Identical authorized supplemental food item means the exact brand and size as the original item obtained and returned by the participant;
34. NOT accept WIC checks before the first day to use or after the last day to use as stated on the WIC check;
35. NOT charge more than the maximum price for a standardized combination of foods as compared to the prices charged by other WIC vendors in the same vendor peer group;

Files, signs and recordkeeping. The vendor shall

36. Keep on file in the above store, a copy of the *WIC Vendor Manual*, this agreement, the approved application and stock price surveys and updates and amendments received from the State WIC Office;
37. Display a sign, sticker, or other evidence of authorization as a WIC vendor, furnished by the WIC Program, in an area visible to WIC participants;
38. Have the current list of approved WIC foods readily accessible to all cashiers;
39. Provide in a timely fashion all information requested during the contract period by the State WIC Office or its designee;
40. Maintain for a period of three years and provide access to paper or electronic records used for state or federal tax reporting purposes and other Program records including: inventory records showing all purchases, wholesale and retail, in the form of invoices that identify the quantity and prices of specific WIC foods, books of account, shelf price records and other pertinent records;
41. Make available upon the request of representatives of the State WIC Office, or the USDA, or the Comptroller General of the United States all WIC checks in the vendor's possession and all required inventory and accounting records for inspection and audit;

42. Allow authorized personnel to monitor the store for compliance with WIC rules and provide access to WIC checks available in the grocery store or pharmacy at the time of the visit;
43. Allow authorized personnel to audit the vendor's inventory and records as a monitoring procedure to determine whether the vendor has claimed reimbursement for the sale of WIC foods in an amount that exceeds the vendor's documented inventory for that food for the same time period;

Vendor stamp and WIC logo. The vendor shall

44. Ensure that the WIC vendor stamp is used only for the purpose and in the manner authorized by the terms of this agreement, state and federal WIC Program rules as stated in regulations, policies and applicable laws;
45. Keep the vendor stamp in a safe place and shall report loss of the vendor stamp to the State WIC Office within 2 days of the loss;
46. Ensure that the vendor stamp is not duplicated, and that a duplicated stamp is not used;
47. Use the acronym "WIC" or the WIC logo only to identify the vendor as an authorized vendor and to identify approved foods in the store. No vendor may include the acronym "WIC" in the name under which the vendor is registered in the WIC Program or in the name under which the vendor does business. No vendor may include the WIC logo, or close facsimiles of the WIC logo, in total or in part, name under which the vendor is registered in the WIC Program or in the name under which the vendor does business;

Duty to notify. The vendor shall

48. Notify the State WIC Office at least 15 days prior to the change of location, name, address, management, corporate officers and majority stockholders;
49. Notify the State WIC Office or local WIC project upon termination of this agreement due to voluntary termination, change of ownership, or when the store ceases operation and to return the stamp following termination or disqualification from the WIC Program. Return the vendor stamp to the State WIC Office within 15 days following a change of ownership, upon closing the store, or upon disqualification;
50. The vendor shall immediately provide written notification of any change in vendor ownership, store location, or cessation of operations. WIC business shall cease and WIC checks shall be deposited promptly. This agreement shall become null and void on the date a change of ownership occurs;
51. Using the vendor/participant complaint form, notify the state or local WIC project of any instance where a participant fails to comply with WIC requirements;

Training. The vendor shall

52. Participate or require designee to participate in annual training in WIC Program requirements and other training sessions when required to do so;
53. Ensure that all employees who accept and deposit checks are trained in check processing procedures;

Responsibility. The vendor shall

54. Be fully responsible for violations of this agreement committed by its owners, officers, managers, employees, agents, representatives or other individuals who directly or indirectly participate in the vendor's operations;
55. Implement a corrective action plan if imposed by the State WIC Office;
56. Comply with applicable federal, state and local health protection laws and ordinances;

Checks, deposits and claims. The vendor shall

57. Accept WIC checks only from participants or authorized proxies as indicated with a name and signature on the WIC Identification;
58. Ensure that the purchase price and date of use is entered in ink for the WIC approved foods actually purchased before the WIC check is signed and that the signature of the participant or proxy is obtained and verified in the presence of the cashier. In EBT systems, a Personal Identification Number (PIN) may be used in lieu of a signature;
59. Deposit WIC checks for payment within 45 days of the first date to use;
60. Pay any claim assessed by the State WIC Office when the State has established a claim in the amount of full purchase price of each WIC check that contained a vendor overcharge or other error, which has not been justified or corrected. In collecting a claim, the State WIC Office may offset the claim against current and subsequent amounts to be paid to the vendor and may sanction the vendor for overcharges or other errors in accordance with Section C of the Agreement; and,
61. Submit a refund or justification for overcharges to the State WIC Office within thirty (30) days of written notification.

B. The WIC PROGRAM Agrees To:

1. Make payment to the vendor for actual retail costs for WIC checks accepted and redeemed in compliance with the conditions contained in Section A. above, Wis. Admin. Code ch. 149 and the *WIC Vendor Manual*. Checks deposited must be within the maximum dollar value established for the check type based on reported shelf prices, redeemed values and reject percentages;
2. Provide an opportunity for vendors to receive payment for checks that exceed the maximum dollar value or other processing errors by re-presenting (re-depositing) the check or electronic payments through ACH debit or ACH credit processes;
3. Provide the vendor with instructions for redeeming WIC checks and for obtaining assistance;
4. Provide a WIC vendor stamp for use in redeeming WIC checks;
5. Provide annual training for the vendor; and,
6. Not discriminate on the basis of race, color, national origin, sex, age, or disability as prohibited by Federal law and U.S. Department of Agriculture policy.

NOTE: To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, S.W., Washington, DC 20250-9410 or call (202) 720-5964 (voice and TDD). "USDA is an equal opportunity provider and employer."

C. Sanctions for Fraud or Abuse

1. The State WIC Office shall permanently disqualify a vendor from participation in the WIC Program if the vendor is convicted of providing cash in exchange for a WIC check or of selling a firearm, ammunition, explosive or controlled substance in exchange for a WIC check. Disqualification of a vendor shall be effective upon mailing the notice of administrative action by the WIC Program to the vendor's address of record in the program. The State WIC Office may not impose a civil money penalty in lieu of a permanent disqualification.
2. The State WIC Office shall disqualify a vendor from participation in WIC for 6 years for:
 - (a) One incident of buying or selling a WIC check for cash; or
 - (b) One incident of selling in exchange for a WIC check a firearm, ammunition, an explosive, or a controlled substance as defined in 21 U.S.C. 802.
3. The State WIC Office shall disqualify a vendor from participation in WIC for 3 years for:

- (a) One incident of selling in exchange for a WIC check alcohol, an alcoholic beverage or a tobacco product;
 - (b) Three or more incidents of claiming reimbursement for the sale of a specific approved food in an amount that exceeds the vendor's store's documented inventory of that food for the same period of time;
 - (c) Three or more incidents of any combination of:
 - 1. Intentionally or unintentionally charging WIC participants more for approved food than non-participants;
 - 2. Charging WIC participants more than the current shelf price for an approved food.
 - (d) Three or more incidents of receiving or redeeming a WIC check outside of authorized channels, including but not limited to receiving or redeeming a WIC check for a vendor that is not an authorized vendor; redeeming a WIC check for food purchased at an address other than the store address that appears on the authorized vendor's application; or depositing a WIC check into a bank account other than the authorized vendor's bank account;
 - (e) Three or more incidents of charging for approved food not received by a WIC participant; or
 - (f) Three or more incidents of providing in exchange for a WIC check credit or non-food items other than alcohol, an alcoholic beverage, a tobacco product, cash, firearms, ammunition, explosives, or controlled substances as defined in 21 U.S.C. 802.
4. The State WIC Office shall disqualify a vendor from participation in WIC for one year for any one of the following:
 - (a) Three or more incidents of providing unapproved foods in exchange for a WIC check.
 - (b) Three or more incidents of charging for approved food provided in excess of food listed on the WIC check.
 5. When a vendor who previously has received a mandatory disqualification receives a second subsequent mandatory disqualification, the State WIC Office impose double period of disqualification.
 6. When a vendor who previously has received two or more mandatory disqualifications receives another subsequent mandatory disqualification, the State WIC Office shall double the third period of disqualification and all subsequent periods of disqualification.
 7. For any of the following violations, the State WIC Office may send a warning letter to the vendor, require training for designated vendor personnel, require implementation of a corrective action plan, require payment of a forfeiture, require recoupment, disqualify the vendor for no more than one year, or impose any combination of these sanctions.
 - (a) Providing cash for returned approved food;
 - (b) Failing to implement a corrective action plan imposed by the State WIC Office;
 - (c) Failing to meet the minimum requirements for authorization listed in Wis. Adm. Code HFS § 149.04(3); or
 - (d) Providing false information to the State WIC Office.
 - (e) One or two incidents of violations stated in 3 (b) – (f) and 4 (a) and (b).
 8. For any of the following violations, the State WIC Office may send a warning letter to the vendor, require training for designated vendor personnel, require implementation of a corrective action plan, require payment of a forfeiture, require recoupment, disqualify the vendor for no more than six months, or impose any combination of these sanctions.
 - (a) Failing to comply with check processing and redemption procedures described in the vendor agreement;
 - (b) Failing to display prices for approved foods on the foods, on the shelves in proximity to the foods, or in the immediate area where the foods are kept in the customer area of the store;
 - (c) Stocking or selling approved foods that were expired or otherwise not fresh;
 - (d) Failing to complete training as required by the State WIC Office or a local project;
 - (e) Failing to comply with applicable health protection laws and ordinances;
 - (f) Failing to maintain or provide the State WIC Office with required information on a timely basis;
 - (g) Duplicating or using a duplicate vendor stamp;
 - (h) Failing to notify the local project in the project service area in which the vendor is located of an instance in which a participant has failed to comply with WIC Program requirements; or
 - (i) Failing to provide to WIC participants or proxies the same courtesies as offered to other customers.

9. Except where prohibited by federal regulation, if the State WIC Office determines in its sole discretion that disqualification of the authorized vendor would result in inadequate participant access, the State WIC Office shall impose a civil money penalty in lieu of disqualification. If a vendor does not pay, only partially pays, or fails to timely pay a civil money penalty assessed in lieu of disqualification, the State WIC office shall disqualify the vendor for the length of the disqualification corresponding to the violation for which the civil money penalty was assessed.
10. The State WIC Office may recoup excess payments made to the authorized vendor resulting from the vendor's violation of this chapter. If a recoupment is imposed, the State WIC Office shall also impose an enforcement assessment of 50 percent of the amount of the recoupment imposed.
11. The State WIC Office shall disqualify from the WIC Program a vendor who is disqualified from the Food Stamp Program.
12. The State WIC Office may impose a civil money penalty in lieu of a disqualification if the State WIC Office determines that disqualification would result in inadequate participant access.
13. The State WIC Office may disqualify a vendor who has had a civil money penalty for hardship by the Food Stamp Program.
14. Voluntary withdrawal of a vendor and nonrenewal of the vendor agreement as alternatives to disqualifications will not be accepted, and will be entered on the record.
15. Violations as outlined in Wis. Admin. Code § 149 and summarized in the *WIC Vendor Manual* may result in termination or disqualification, following provision to the vendor of reasonable notice and opportunity for a hearing.
16. Violations of Wis. Stat. § 253.06 or conditions of eligibility in Wis. Admin. Code § 149 may result in termination or disqualification, following provision to the vendor of reasonable notice and opportunity for a hearing.
17. Violations of Wis. Stat. § 253.06 may result in a forfeiture of not less than \$10 nor more than \$1000, recoupment and an enforcement assessment of 50% of the amount imposed, following provision to the vendor of reasonable notice and opportunity for a hearing.
18. The State WIC Office will determine the action to be taken whenever vendor abuse, fraud, or administrative violations are discovered. If the State WIC Office determines that the vendor has violated applicable rules or regulations, the vendor will be disqualified from participation in the WIC Program for a period of no more than the maximum period allowed under 7 CFR § 246. To obtain re-authorization, vendors who are disqualified must re-apply and meet all current requirements for authorization.
19. If an individual, partnership, corporation or other business structure is convicted of a criminal offense involving WIC, food stamps, or any other Program operated by the Food and Nutrition Service of the U.S. Department of Agriculture, all grocery stores and pharmacies wholly or partially owned or managed by the convicted individual, partnership, corporation or other business structure, or by a partner of a convicted partnership or an officer, director or majority stockholder of a convicted corporation, shall be terminated from WIC vendor authorization and shall be disqualified from future WIC vendor authorization for the maximum disqualification period allowed by federal law. This termination and disqualification shall occur whether or not the grocery store or pharmacy was the location at which the crime occurred, and regardless of any penalty imposed upon the convicted party by the court of conviction.
20. State WIC office sanctions for program abuse shall not be construed as excluding or replacing any criminal or civil sanctions or other remedies that may be applicable under any federal and state statute or local ordinance. A vendor who commits fraud or abuse of the program is liable to prosecution under applicable federal, state or local laws.
21. The State WIC Program will, where appropriate, refer vendors who abuse the program to federal, state and local authorities for prosecution.

D. Vendor Appeals

1. Vendor appeals are governed by this section and 7 CFR § 246.18, Wis. Stat. 227 Subch. III, and Wis. Admin. Code ch. HA 1. A vendor may file a written request for a chapter 227 administrative review of an adverse action taken by the State WIC Office.
2. As an alternative to a chapter 227 hearing, a vendor may request from the department an abbreviated review for any of the following actions taken by the State WIC Office:
 - (a) Denial of authorization based on a Food Stamp Program disqualification or civil money penalty in lieu of disqualification from the Food Stamp Program;
 - (b) Denial of authorization based on vendor selection criteria if the basis of the denial is a WIC vendor sanction or a Food Stamp Program withdrawal of authorization or disqualification; or
 - (c) Termination of the agreement because of a change in ownership or location or cessation of operations.
3. The following actions are not subject to appeal:
 - (a) Expiration of a vendor's authorization;
 - (b) The validity or appropriateness of the State WIC Office's selection criteria;
 - (c) The validity or appropriateness of the State WIC Office's vendor peer group criteria and the criteria used to identify vendors that are above-50-percent vendors or comparable to above-50-percent vendors;
 - (d) The validity or appropriateness of the State WIC Office's participant access criteria and the State WIC Office's determination regarding participant access;
 - (e) The State WIC Office's determination whether a vendor had an effective policy and program in effect to prevent trafficking and whether the vendor owner was involved in the conduct of the violation;
 - (f) Denial of authorization if the State WIC Office vendor authorization is subject to procurement procedures applicable to the state agency;
 - (g) Disputes regarding check payments and vendor claims (other than the opportunity as permitted by 7 CFR § 246.12(k)(3) to justify or correct a vendor overcharge or other error); or
 - (h) Disqualification of an authorized vendor as a result of disqualification from the Food Stamp Program.
4. The State WIC Office shall begin an adverse action, including disqualification or imposition of a civil money penalty, forfeiture, recoupment or enforcement assessment by serving upon the vendor a written notice of the action by certified mail or personal delivery at least 15 days in advance of the effective date of the action described in the notice.
5. Requests for a hearing shall be in writing and shall be filed within 15 days after service of notice and adverse action. A request shall be considered filed on the date of actual receipt by the agency, or the date of the postmark, whichever is earlier. A request filed by facsimile is complete upon transmission.
6. Requests for an administrative hearing shall be filed with the department of administration's division of hearings and appeals. Requests for abbreviated review shall be filed with the State WIC Office.
7. The decision-maker's review decision shall constitute the agency's final decision. Review decisions shall include notice of a vendor's right to appeal the determination to circuit court.
8. If the department finds that public health, safety or welfare imperatively requires emergency action and incorporates a finding to that effect in its order, summary suspension of WIC authorization may be ordered, pending proceedings for revocation or other action. Such proceedings shall be promptly instituted and determined.

E. General Conditions

1. The State WIC Office will terminate the agreement if it identifies a conflict of interest, as defined by applicable State laws, regulations and policies, between the vendor and the State WIC Office or its local projects.
2. The State WIC Office reserves the right to amend this agreement upon thirty (30) days' notice.

3. Neither party has any obligation to renew this agreement.

This agreement, the rules and regulations referenced within, together with the *WIC Vendor Manual* contain all terms and conditions agreed upon by the parties. The vendor agrees that the vendor has read, understands, and will comply with the terms in this agreement. The vendor also agrees to comply with conditions stated in: 7 CFR § 246, Wis. Admin. Code ch. 149, the completed application form, stock price surveys, the *WIC Vendor Manual*, list of approved foods, memos, other formal instructions and terms of participation issued to vendors by the State WIC Office.

The undersigned represents that he/she is either the sole proprietor or has the legal authority to obligate the vendor.

For initial applicants, this Agreement is effective when training is completed and the *WIC Vendor Manual* and authorized WIC vendor stamp are provided. For vendors making reapplication, this Agreement is effective on November 1, 2007 or the date signed by the Department, whichever is later.

Print Name and Title of Vendor, or
Person with legal authority to obligate Vendor

SIGNATURE – Authorized Person

Date Signed

The undersigned has authority to sign this Agreement on behalf of the Wisconsin WIC Program:

Print Name and Title of person with authority to sign

SIGNATURE – Authorized Person

Date Signed

WIC VENDOR SUPPLY ORDER FORM

Instructions: List the quantity of each item needed in the space below. Items will be mailed within two weeks of receipt of order and are available at no charge to authorized vendors.

Quantity	Form Title	Form Description
	WIC Approved Foods List - English	Color photos and description of approved foods, for use by cashiers and WIC participants
	WIC Approved Foods List - Spanish	Color photos and description of approved foods, for use by cashiers and WIC participants
	"How to use your WIC Fruit and Vegetable Checks"- English	WIC participant guide on how to shop with the new WIC Fruit & Vegetable check.
	"How to use your WIC Fruit and Vegetable Checks" - Spanish	WIC participant guide on how to shop with the new WIC Fruit & Vegetable check.
	WIC Vendor Training (DVD)	Cashiers & managers training presentations
	Cashier Instructions for Accepting Wisconsin WIC Checks	Step-by-step instructions for cashiers
	"WIC Approved Food" shelf talkers	Tags to identify WIC foods, designed to be used on store shelving.
	"WIC Checks Accepted Here" register decal	Small cash register sticker
	"If Using WIC Checks..." register decal	Cash register sticker to remind participants to separate WIC items from other groceries
	"WIC Checks Accepted Here" door decal	Sign to identify store as an authorized WIC vendor
	"WIC Infant Formula Checks Accepted Here" door decal	Sign to identify store as an authorized WIC vendor (pharmacies only)
	7 CFR 246, Sec. 253.06, Wis. Stats., and HFS 149, Wis. Adm. Code	WIC Program laws, rules and regulations

Name of Store Requesting Supplies:		WIC Stamp Number:
Street Address	City	Zip
Contact Person:		Phone: ()

Mail Order Form to:

WISCONSIN WIC PROGRAM
ATTN: VENDOR SUPPLIES
PO BOX 2659
MADISON WI 53701-2659

VENDOR / PARTICIPANT COMPLAINT WISCONSIN WIC PROGRAM

Print clearly using blue or black ink. The completed form is to be submitted to your Local WIC Project Office.

SECTION I

Complaint filed by

Participant _____ Vendor _____ Other _____

Name _____

Address _____

City _____

Complaint is against

Participant _____ Vendor _____ Other _____

Name _____

Address _____

City _____

SECTION II

This section to be completed by person making the complaint

Date of incident _____

Person who witnessed incident _____ Telephone () _____
(if different from person filing complaint)

Address _____
Street City State Zip

Description of complaint (Provide as much information as possible. Use the reverse side of form if needed)

SIGNATURE - Complainant _____ Date Signed _____

SECTION III

This section to be completed by WIC Program Representative

Date Complaint Received _____

Representative Receiving Complaint _____

Title _____ Project Name _____ Project No. _____

Resolution of Complaint _____

Contacted WIC Vendor Management Section Yes _____ No _____

RETAIL VENDOR APPLICATION AMENDMENT WISCONSIN WOMEN, INFANTS AND CHILDREN (WIC) PROGRAM

This form must be completed whenever a change occurs that affects the current agreement between the vendor and the State of Wisconsin WIC Program. Examples of changes include a change in location, management or corporate officers. The completed form, when approved by the State WIC Vendor Management, becomes an amendment to the vendor agreement between the vendor and the State of Wisconsin WIC Program. All other conditions of the vendor agreement remain the same.

The authority for requesting and using personally identifiable information, including your Social Security number, is §253.06(3) Wis Stats. Disclosure of your Social Security number is voluntary. Failure to complete the form may delay processing of the amendment. Information, including the Social Security number, will be used to investigate continuing eligibility of WIC authorization, and may be disclosed to federal, state and local law enforcement agencies, and federal and state tax authorities.

This form may not be used when there is a change of ownership of an authorized WIC vendor. When a change of ownership occurs, the former owner must be terminated from the program and the new owner must submit a complete Retail Vendor Application. Contact the State WIC Vendor Management for the forms.

INSTRUCTIONS: Type or print using blue or black ink. Complete the "Current Information" section, the "Certification" section, and all sections that apply to the change. Submit the completed form to the WIC Vendor Management, P.O. Box 2659, Madison, WI 53701-2659.

SECTION 1: CURRENT INFORMATION

Name Under Which Store is Doing Business (e.g., name on store signs)			Vendor Stamp Number
Telephone Number of Store ()	Store Street Address	City	Zip Code

Check all that apply:

- ☐ Change of store location ☐ Change in Corporate officers ☐ Change in name
☐ Change in manager(s) ☐ Prices remain the same or have been reduced
☐ Employees remain the same ☐ Other change (briefly describe): _____
☐ Individual trained in the rules and regulations of the WIC Program remains the same

New Food Stamp Authorization?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, provide the new number:	<input type="text"/>
New Wisconsin Sellers Permit (Sales Tax)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, provide the new number:	<input type="text"/>
New Federal Tax Identification?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, provide the new number:	<input type="text"/> - <input type="text"/>

SECTION 2: NAME CHANGE

New Name of Store	Date of Name Change
-------------------	---------------------

SECTION 3: LOCATION CHANGE

New Telephone Number of Store (if applicable) ()	New Store Street Address	
P.O. Box	City	Zip Code
Date Moving to New Address	Date Store Will Close at Old Address	
Store Size (Check one): <input type="checkbox"/> Under 4,000 square feet <input type="checkbox"/> 4,001 to 10,000 square feet <input type="checkbox"/> Over 10,000 square feet		

SECTION 4: CORPORATE AGENT OR OFFICER(S)☐ New Corporate Agent☐ New Corporate Officer(s)

Corporate Agent Name (First, Middle Initial, Last)	Telephone (if different from above) ()		
Full Name and Position Held (e.g., Name, President)	Social Security Number	Date of Birth	Effective Date
Full Name and Position Held (e.g., Name, President)	Social Security Number	Date of Birth	Effective Date
Full Name and Position Held (e.g., Name, President)	Social Security Number	Date of Birth	Effective Date

What portion of the business is owned by the new corporate officer(s)? ☐ More than 50% ☐ Less than 50%

Full name(s) of corporate officer(s) replaced by the new officer(s):

1.

2.

SECTION 5: NEW MANAGER(S)

New Manager Name (First, Middle Initial, Last)	Social Security Number	Date of Birth	Effective Date
New Manager Name (First, Middle Initial, Last)	Social Security Number	Date of Birth	Effective Date
New Manager Name (First, Middle Initial, Last)	Social Security Number	Date of Birth	Effective Date

Full name(s) of manager(s) replaced by the new manager(s):

1.

2.

SECTION 6: CERTIFICATION

1. I certify that the information submitted on the form is accurate and complete. I affirm that I have authority to contract for the business. I understand that the terms and conditions agreed to in the original agreement remain unchanged.

Full Name and Title of Individual Completing this Form (Type or Print):

Last Name	First Name	Middle Initial	Title
SIGNATURE – Individual Completing this Form			Date Signed

2. If the individual completing this form is not an owner, corporate officer, or other individual authorized to sign on behalf of the vendor, then the owner, manager or other individual authorized to sign on behalf of the vendor must sign below.

Full Name and Title of Owner, Corporate Officer or Other Authorized Individual (Type or Print):

Last Name	First Name	Middle Initial	Title
SIGNATURE – Corporate Officer or Other Authorized Individual			Date Signed